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"Operarius mercede sua dignus est."

DOLLARS TO DOCTORS

OR

Diplomacy and Prosperity in Medical Practice

BY

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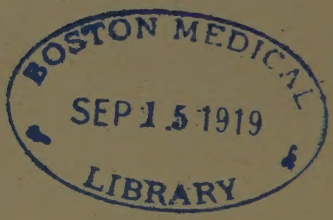

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INTRODUCTION

The conventional endeavor of medical men to elevate and maintain the profession above the reach of the alleged contaminating influences of "commercialism," has encouraged the public to regard compensation for professional services as quite properly the very last thing to be considered or attended to—in other words, that a doctor should be satisfied with "thanks" in payment for his services.

Old-time ethics taught unswerving allegiance to patients regardless of financial reciprocation—that a doctor's first duty is to uplift mankind; to labor for the relief of human suffering and the betterment of the human race, without regard to the rewards earned in so doing. For all his labor, pains and sacrifices, he was to be provided with a crown of glory in another world, if the beneficiary failed to respond with a due equivalent in currency here below.

Antiquated literature advocates the idea of a doctor being a divine also, so that, when physic failed, the individual returning to dust might enjoy the great blessing of being skilfully guided into a haven of eternal rest and happiness, in the absence

of a regular spiritual adviser who expected some material compensation for his trouble if the doctor did not.

Again, when death laid his clammy hand upon a victim who had waited until the last moment in hopes of escaping the mortal fate, the doctor, hurriedly sent for, finding no way of salvation, was expected to enact the role of attorney and prepare a will for the sick man, which the sorrowing relatives accepted as a cheap blessing that did not diminish their legacies by so much as a penny of sordid fees.

In other words, the physician was, and by many, is now expected to stand in a sea of choice, rich blessings, and ladle them out with unsparing hand to all the world, not daring himself to touch, taste or handle, lest he become intoxicated with overmuch plethora.

There is and can be no exception to a doctor's being good, and, if he be so inclined, to proclaim his belief in a universal goodness, or even sanctity, like a true Christian, but it is not in accord with modern thought and progress, nor modern common sense, to coerce the profession into pauperism by the observance of customs that may render his chances of remuneration for his work less than those of any other human being in any other occupation in life.

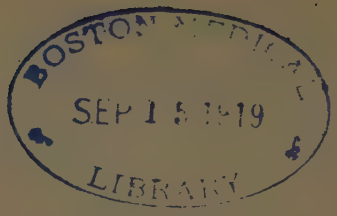
The need of commercial information, and a knowledge of professional diplomacy on the part of phy-

sicians entering practice, and of those long in the field, who have never been able to secure a suitable competency, has been apparent to the writer for many years, and in the following pages it is his aim to incorporate just such needed information, gained through extensive experience with all classes of humanity, in both medical and surgical practice, as shall spare the novice and the physician who lack tact in case-taking, and are not familiar with the commercial management of professional business, the painful experiences of disappointment, and, possibly, financial failure. There is much written between the lines, but generally, he who runs may read. Whatever of satire there is finds great provocation.

Trusting that my effort to impart practical information may not only enable my readers to augment the bulk of their business, but to reap the rewards of their labor this side the grave, while still in the flesh, I am,

Fraternally Yours,

THE AUTHOR.



DOLLARS TO DOCTORS

CHAPTER I

SOME ANTIQUATED NOTIONS

"Tempora mutantur et nos mutamur in illis."—The times are changed and we are changed with them.

WITH the other learned professions advancing under a full head of steam, the medical profession is clogged with so many drawbacks, one very serious one in particular, that if the great mass of earnest practitioners were to lose heart, through lack of incentive to continue their labors in behalf of humanity, it could not justly be a matter of surprise.

The "cloth," as it is styled, those who accept theology as their life study, and adopt the spiritual welfare of mankind as their life work, have progressed far beyond the nightmarish dreams of the old fashioned dealers in pure brimstone and bubbling pitch pots, fiery pits, and grinning demons bearing pitchforks heated to a brighter glowing red

than any Senator Tillman ever pronged his enemies with, have literally torn down ancient corner stones and rifled the contents, or else substituted pinchbeck gewgaws for the "pearls of great price" therein stored; or else, again, so altered, amended, modified, and reconstructed the superstructure upon the dogmatic foundation, that modern theology would indeed be a wise child if it could possibly recognize its own paternity.

The law as it was writ upon the Mosaic tables now meets with boisterous hilarity, the fiddling and crashing of cymbals, and the merry two step dance around the golden calf that the modern Aaron has built at the earnest request of the people, and there is no angry Moses to dash the law to fragments. On the contrary, our Moses has joined in the giddy whirl, and, with the high priests and leaders, has cast lots for the gold calf, or for as much of it as the winner in the raffle can carry.

Lycurgus has progressed into a reckless chauffeur, and his roadway is strewn with the wrecks of his confiding clients, while our Solons are monopolizing lucrative positions and feeding the populace upon "undigested securities," instead of wasting wisdom upon hoi polloi. The messengers sent from Jupiter limp and go slowly; but when sent from Plutus, they run, and are swift of foot. To put the point plainly, as says Ecclesiastes: "The wise man's eyes are in his head; but the fool walketh in darkness." 'Tis indeed a strenuous age, a com-

mercial age, in which the industrial spirit soars high; when to be a Captain of Industry is of far more moment than to exercise the faculties of an ancient philosopher, or the nasal twang of a moralist of the Middle Ages.

We have changed with the times; we have our hands to the plow and must not, dare not look back, lest the furrow ahead grow crooked, and we must keep it straight.

What can be better than the advice of the immortal Francis Bacon, in his essay "Of Innovations?"

"As the births of living creatures at first are ill shapen, so are all innovations which are the births of time; yet, notwithstanding, as those that first bring honor into their family are commonly more worthy than most that succeed, so the first precedent (if it be good) is seldom attained by imitation; for ill to man's nature as it stands perverted, hath a natural motion strongest in continuance, but good, as a forced motion, strongest at first. Surely, every medicine is an innovation, and he that will not apply new remedies must expect new evils, for time is the greatest innovator; and if time, of course, alters things to the worse, and wisdom and counsel should not alter them to the better, what shall be the end? It is true that what is settled by custom, though it be not good, yet, at least, it is fit; and those things which have long gone together are, as it were, confederate within themselves; whereas new things piece not so well; but, though they help by their

utility, yet they trouble by their inconformity; besides, they are like strangers, more admired and less favored. All this is true, if time stood still, which, contrariwise, moveth so round that a froward retention of custom is as turbulent a thing as an innovation; and they that reverence too much old times are but a scorn to the new."

This is true philosophy, the true modern philosophy, one upon which the twentieth century opened, and upon which it will doubtless close. It is satisfactory and soul filling; it leaves nothing to be desired, nothing to be omitted or added. As Macaulay says of this very essay: "It is a philosophy which never rests, which is never attained, which is never perfect. Its law is progress. A point which yesterday was invisible is its goal to-day, and will be its starting-post to-morrow."

We know and we feel that we are on the right road to victory, to the pinnacle of success; we have philosophy behind us and philosophy before us; the golden apples of Hippomenes can not retard us in the race, for our eyes are in our head," we have dropped the past as an old worn garment, moth riddled and patched.

"Tempora mutantur et nos mutamur in illis." As a medical friend said, among other things, not long ago at a reunion dinner in response to the toast, "Where are we at?"

"Oh, we're great on hypnotizing, paralyzing, mesmerizing.
To telepathy and mind cure we are frozen;
With Mahatma, Zend Avesta, we are always plans devising.
To secure the best results among the chosen.
We talk to friends far off, when our minds are in accord,
Through the air without a wire or a letter;
We hold our ear up high, and soon receive some word
On a wavelet, that our friend is getting better.
We're acquainted with microbes, bacilli, and ptomaines;
Micrococci we eat every day for dinner;
Bacteria and trichinæ with protoplasmic remains,
Are flourishing to-day in every sinner
We boil them all together till we get rich, thick soup,
And mix the stuff with jell' to make a serum,
Then give this to our patients in the neck or in the crupp,
And never fail to either kill or cure 'em."

CHAPTER II

WHERE DO DOCTORS STAND?

"Is this a dagger which I see before me,
The handle towards my hand?"
—Macbeth, Act II, Scene I.

IN THE midst of all these laudable innovations, this modern tohu bohu, where is the medical profession? It is certainly in the whirl, but there are those who deem it too sacred an art to be of it, wherefore they clog it with drawbacks; they insist that upon the façade of every temple erected to Esculapius should be inscribed:

"Backward, turn back, O Time, in your flight,"

forgetting that it is only live fish that swim up stream, and dead ones that float down. Very well, let us turn backward to humor the songster.

There was a time when there was no medical profession—no doctors—a blissful period to which many now look back and sigh for as the Israelites in the Desert sighed for the fleshpots of Egypt. Then—the scene is laid in magnificent, glorious Babylon, one of whose kings with a long name was a vegetarian and ate grass for seven years—

when anybody was taken sick he was carried out into the road or street and dumped there for the passers-by to examine and prescribe for, if any of them had ever been afflicted with the same disease and recovered from it. The public of the period did not seem to mind it, because it was the custom. By and by, as a matter of course, new diseases appeared, which nobody else had ever had, and consequently the patient died, not because there was no remedy to save him, but because no one knew of any—a distinction without much difference. The chances in every case were always against the patient, for the reason that there were many diseases which the people did not care to admit having had by suggesting a remedy. Moreover, the number of maladies increased to the incumbering of the streets, and "Every man his own Physician" not yet having been published, recourse was had to the temples, which were spacious and cool, and could accommodate an indefinite number.

Then came an "innovation" as Bacon calls it. The priests of the temple took a hand in administering to the sick and trying experiments upon them, in very much the same manner as some modern physicians try the effect of remedies upon the lower order of animals. If a sick man survived the use of any plant drug, its name was placed in a book kept for that purpose as "efficient;" if the patient succumbed, the plant had "inefficient" inscribed opposite its name. In this manner, the priests of the

temple acquired considerable proficiency in the cure of diseases, and discovered the uses of many of the medicinal plants which are still in common use as remedial agents.

But now happened another innovation, one of much graver and more serious import, because it left its impress upon medicine for ages, reaching such a climax of absurdity in the Middle Ages that the common sense of mankind, revolting, finally broke its chains. The priests of the temple, at first, required a greater or less votive offering to the temple, in proportion to the wealth of the convalescent, and the result was so favorable that the practice was further encouraged by attributing the cure not to the remedy but to the sanctity of the priest, an idea that grew in favor and size of votive offerings until it was extended to the power of the deity, the priest being transformed into a mere agent. The votive offerings were still maintained, but, though insisted upon to make a cure certain, they were professedly voluntary, though if not considered satisfactory a mistake in the character of the drug was made, and the patient died, his taking off being ascribed to his niggardliness, which was a warning to other patients.

The innovation progressed still farther until medicine became connected with religion and its practice monopolized by the priests. After the fall of the pagan system this practice of connecting the sick with religion continued,

and by attaching his recovery to some special exercise of the power of Heaven in his behalf, became an essential element in the practice of medicine. It became intermingled with astrology, because astronomy concerned the movements of the heavenly bodies; with soothsayers, who called up spirits from the "vasty deep;" with alchemy, because of its mysteries, until the human mind revolted.

However, it was not until the opening of the nineteenth century that the innovation of separating the theological idea from the practice of medicine gained substantial ground. Numerous learned physicians had labored strenuously to stem the tide of submission to the belief that there was something specially providential in every dose of medicine, something sacred in the dispensation of curative agents, but the great mass of the people were slow in abandoning the faith of ages, but the separation of theology and medicine was generally accomplished, and the nineteenth century opened with medical practitioners who were physicians, surgeons and apothecaries. These were the then recognized classes, the educated rank and file, a new profession, whose education evoked the critical faculties and tended to the overthrow of the old empirical religio-medical authority; but they were still in the minority, empiricism being split up into a group of nondescripts calling themselves surgeon-apothecaries; men-midwives, cuppers (baumscheidists),

leeches, tooth-drawers, compounders, and dispensers. Barbers then practiced surgery, bloodletting principally, as the modern barber's pole of red and white, to represent a bloody bandage, bears witness.

Strange as it may seem, although the practice of medicine became a profession separate and distinct from the dispenser of theology, the ethical idea of medicine that originated in the temples of Babylon, Memphis, Thebes, and Sais ages before, that the healing power came from the Deity and not from any essential essence or principle in the drug, was substantially retained, and the physician was still fancied to be an agent of that Deity, and the offering bestowed upon him was still regarded as, in some sort, a votive offering in the temple. Hence a fixed fee was a desecration of the sanctity of a holy profession, and a notice or advertisement of one's ability to practice the art of healing was a violation of the ages of well defined unalterable ethics. This spirit pervades the profession to this day, and it is a prejudice the deepest rooted and the most difficult to overcome.

CHAPTER III

A NEW CODE OF MEDICAL ETHICS NEEDED

"Change not? Why, all the world's agog for change;
'Twas constant change that built up this fair world!"

—Anon.

STRANGE it is that at the beginning of this twentieth century, with one hundred years of warfare to unlink the spiritual influences that bedraggled medicine with its mysteries, its magic and empiricism, we should have rid it of the substance and retained the shadow!

The hysterical bases of the ante nineteenth century maladies have crumbled before the progress of prophylactics, and the psychological mysteries of humanity have been dissipated before the searchlight of science illuminating the physiological connecting links between mind and matter. But the ogre of mysticism still clutches the precision of our knowledge of materia medica, and tinges the simplest remedies, the plainest curative discoveries of the scalpel with ancient romanticism, seasons them

with the moldy flavor of the ancient special providence. The Deity continues to be the scapegoat of reckless, heedless humanity, and the remedial essences common to all nature, and which sprang into being at the moment of the original creative fiat, are invested with the melodramatic, empirical buffoonery of Oriental Kismet.

Quoth the man in the ditch as he swallows a pill: "Lord help me." When the pill works he says: "Thanks be to the Lord." It never occurs to him that the elements of the pill, the curative properties, were created when chaos ended its reign, and that so far the Lord had all to do with it, but at the moment of its deglutition it acted wholly impersonally, the cause of its use being an indigestion or some act of folly on the part of the sick man—the exercise of his free will in the wrong direction. Nevertheless the Lord is made the scapegoat. The fire that springs from a match when struck is not a special creation, but an original creation lying perdu since the dawn of creation, when "Fiat Lux" rolled in thunder tones through the gloomy vaults of chaos.

It is the old hampering withe of supernatural agencies that frets the progress of medical science, the chain that binds it to the oar, the galley slave of empiricism. It is time to establish a new code of medical ethics, to corespond with the progress of the age. Jurisprudence has adopted a new system of ethics, so likewise has theology, and the

ethics of the commercial and industrial world are so utterly at variance with former codes of honor, that if John Jacob Astor, for instance, could reappear in his accustomed haunts, he would not possess even enough kindergarten information and ability to perform the duties of entry clerk in a modern department store, and the ablest Phoenician, Venetian, or Hanseatic financier could not pass a civil service examination for porter in J. Pierpont Morgan's banking house.

The truth is, theology, law, and commerce have formed an industrial co-partnership on the co-operative plan, with medicine on the outside cooling its heels at the back door. It is time for medicine to force an entrance into this financial dreibund, and the only way to do it is to drop sentiment and go into business. How the dry bones rattle their amazement at this unheard of proposal! But it must be done, otherwise what verity is there in the maxim preached from the pulpit, dinned into the ears of jurors in our courts and flaunted at us in full-page advertisements and six-foot posters on our dead walls: "Operarius mercede sua dignus est"? Let the Doctors pursue the Dollars and hug to themselves the Ciceronian dogma: "Justitia suum cuique tribuit."—Justice gives every man his due.

The medical profession is the grandest and noblest in the world. Theology aids a man's spiritual nature to prepare for a future state; commerce and industry enable him to provide creature comforts,

and the law puts him in a position to obtain justice when his rights are tampered with. But Medicine is equal to all three: it provides him with a healthy body in which to cultivate a healthy mind—"Mens sana in corpore sano" is the maxim; it fits him to enjoy properly and rationally the creature comforts he obtains through commerce and industry, and it relieves him from the physical, nerve-racking distress and anxieties due to injustice. Without the medical profession man would become a morose agnostic, a dyspeptic tradesman, and a distempered applicant for justice. His physical ailments and his mental idiosyncrasies, consequent upon a deranged liver or other vital organ, would convert him into an unhappy, unrefined savage, unfit to enjoy, and unfit to comprehend the benefits, advantages and happiness of a higher life springing from advanced civilization. Without the counsel, advice, and reassuring consolations of medicine, his mind would become a receptacle for the horrid visions of an irregulated imagination, a prey to physical infirmities.

What, indeed, is a member of the medical profession? When he shall have been inscribed in some future litany of humanity as "Consolator afflictorum," common justice will have been accorded him, and though it would be unwarranted on his part to deck himself with a halo, yet it must be said that the physician—the medicus, stands on a plane higher than any of the other learned professions, for the members of the latter fly to him as a

refuge against bodily ills, and even the dying saint with the door of heaven appearing open to him, swallows one more bolus, accepts just one more haustus, in hopes of remaining on earth a little longer. He is first to receive man into this world of tears, follows him at his beck through his peaceable or stormy voyage of life, and is the last to close his eyelids for him when the sands of life have ceased to run.

To enable him to fulfill his high and noble mission he must put himself in a position that he may do so creditably and successfully. A multi-millionaire boldly announced not long ago that he considered himself the trustee of the Lord in disposing of his multi-millions. Good, but if that be true in the case of a man of mere money, what position does he fill, what position does he occupy, who is the master of the ills to which the flesh is heir? If the Captain of Industry amasses his millions to become the involuntary trustee of kind Heaven; enabled by his accumulations to keep watch and ward over men's delinquencies, and to supply them with what he shall deem for their best good, the doctor stands as the universally selected administrator of man in the flesh, a natural guardian and trustee to make his pathway through life easy, smooth and painless.

Were doctors made the Captains of Wealth, the trusteeship would be more diffuse and appropriate, for who knows the real wants of men better than

he who presumes not God to scan, but makes man his proper study. Then, indeed, would medicine become consistent, and a safe refuge for the afflicted. Peter would not be robbed to pay Paul, but Dives would be made to understand that his toothache, though no more intense than that of Lazarus, is worth a thousand times more to cure than that of him who gathers crumbs from beneath his table.

But a forbidding wall of rigid desiccated ethics forefends his humanitarian aims and crushes his aspirations to elevate humanity, beneath the Juggernaut of an antiquated testament penned on the streets of Babylon, and in the temples of the Nile. The butcher, baker, and candlestick maker cry their wares at every street corner; the lawyer puffs up his successes from the housetops and demands vociferous recognition as a superlative wholesale and retail dealer in justice and equity, while clergymen avail themselves of all the paraphernalia of theatricals to gather in lucre. Wherefore? The two first for personal objects, the latter to cancel a mortgage on his fine church, for the far off heathen, or to bolster up some public reform fad. But the doctor, the man who can benefit humanity, whose training and life endeavor trends to the good of his fellow men, is shorn of his right to accumulate funds for his trusteeship; must remain behind a dark, mysterious curtain, burrow in the earth like a blind mole, instead of placing his shining light upon a mountain top to point out his whereabouts

and his capacity for curing mortal ailments. He is relegated to "votive offerings," voluntary contributions, by a system of pseudo ethics founded mostly upon jealousy, envy, incompetency, and monopoly. Is it not time for doctors to fall in with the spirit of the age and cast their lines in a clearer pool, less banefully choked with the miasmatic mud of heathen superstition?

Men of the pill and scalpel, you of bloodless surgery and triturations, even you who rely upon faith and prayer as agents to relieve the flesh, to whatever school you may belong, remember that long ago your calling was invested with a sacred, a holy dignity and character, which has been preserved through the ages, but which is reduced to inanity, submerged beneath so-called "moral regulations" inept at this period of human progress to accomplish its destiny. You see on all sides a reaching out and a grasping by the Dreibund of Theology, Commerce, and Law, and you, who should stand in a position of power and emolument at the front gates, are forced to the garbage box in the rear. You do not value your profession high enough; you permit it to be the football in the triangular game, and allowing your hands to be tied, you look on helpless to prevent, consent to be utilized as a makeshift, as a tonic to brace up the others, while you, yourselves, grow weary and faint with

unsatisfied longings toward lifting man out of his slough. Now is the time to demand recognition, not as a favor, but as a right, and this you can do by inscribing upon your escutcheons the simple legend:

"Operarius mercede sua dignus est."

CHAPTER IV

SOME DETAILS OF A CHANGE

"Diving and finding no pearls in the sea,
Blame not the ocean, the fault lies with thee!"

WE ARE in the midst of an era of scientific advancement, in which superior professional service is required, and it is quite proper that the compensation demanded be fully commensurate with the requisition made on professional skill. The reason is, because there is not a single skilled operation that has not required years of careful, strenuous study and toil to perfect. The results are speedy, but the preparations were lengthy.

There was a time when circumstances warranted the physician in the indulgence of charitable impulses on occasions, to an extent that would now be considered not only inconsistent, but perfunctory by all fair-minded people, lay or professional. At the present time there are numerous free hospitals in every city for the treatment of the unfortunate afflicted, who are unable to pay for services, and it

is not necessary for physicians, not specially employed to attend the poor, to give charity cases the attention once required of them, although, in cases of emergency, no physician will make any distinction between those unable to pay and those well able.

Practice and reputation, formerly, were built up by indiscriminate service to the just and to the unjust; the ability to pay the fees expected or charged the rich or poor, or that large class of people who never are burdened with honorable motives relative to the payment of medical bills; indeed, they rather pride themselves on "beating the Doctor". The whole matter of the compensation of the physician was of small moment and often left to the conscientious scruples of the beneficiary, who was privileged to settle promptly in an honorable way, never to pay, to pay in worthless promises from time to time, or to exchange, in lieu of cash, for services rendered, farm produce, cord wood, calves, dogs, cats, or other live stock. Even then the quid pro quo was dribbled along, and usually delivered when not wanted, and therefore of less value.

There was a time also when young physicians furnished free service in order to get experience, and when the customary leniency of physicians with debtors barred the asking for fees long overdue. "You can experiment on old Jones, my boy. He will give you plenty of practice, but he never pays

his bills." Practically a case of "vivisection," which, if the dilatory patient had known, he might have exerted himself to pay up.

In this day of progress, it is not considered the prerogative of one physician or surgeon to gauge the value of another's services. All have the right to proportion their fees to accord with the degree of their personal ability and the character of the demand made thereon, every professional man being the judge of his own value, and the sole arbiter of his price. Furthermore, it is the right of the physician to determine the time of payment.

The universal apathy of beneficiaries in the discharge of their obligations to the medical profession warrants the exercise, on the part of all physicians, of every reasonable precaution to secure prompt and adequate compensation. The famous surgeon Abernethy knew how to protect himself, although he belonged to the rigid ethical school. A Scotch lord sprained his ankle, a simple case of "out of joint," but it hurt more than if he had been a commoner.

"One thousand guineas," said Abernethy, after "setting" the joint by a turn of his wrist.

"Hoot, mon, I'll pay no such exorbitant fee," quoth the noble lord with a rising gorge.

"Oh, very well," declared the surgeon, grabbing the ankle, and throwing it out of joint again prepared to depart. His lordship nearly fainted with

pain and begged Abernethy to put him out of misery.

"Two thousand guineas, in advance," was the laconic demand. He got them.

It is well in all cases, where circumstances will justify, to settle on the amount of your fees in advance of rendering service, and demand settlement in cash or satisfactory obligation to become due and payable at a date not too remote. When the nature of the service is emergent, or such that circumstances will not admit of advance settlements, demand the same at the earliest favorable opportunity after service is rendered, remembering always that their value shrinks in the estimation of patients in direct inverse ratio to the lapse of time and the recovery of health.

"The devil was sick, the devil a monk would be;
The devil was well, the devil a monk was he."

The rights of the wealthy are sometimes urged—the right to credit until such time as best suits them to pay. The pertinent adage concealed in the old couplet we quote applies here with considerable force.

No attorney accepts a case of gravity without a substantial retainer. Then what of services that alleviate human suffering or stay the hand of death?

After health is restored the value of professional services dwindles, in the estimation of those cured, from their true value, or what they were willing

to pay for relief and cure while still in the grasp of physical distress, to an insignificant pittance that has not the least semblance of adequate remuneration for the time expended and skill exercised.

The whole course of a successful professional career resolves itself into one of diplomacy, associated with indispensable professional capacity and a knowledge of business methods.

One is as essential as the other, a fact that has been attested by the self-pauperizing customs of men professionally able, who have had no conception of the role played in a successful professional career by acute business tact, and whose skill has therefore been utilized with a bare "thanks" for payment, sometimes without even that. "I didn't expect you to send me a bill, doctor, I thought you were my friend." And so the worthy doctor descends poor and needy to an unknown grave, without ever thinking of "goring the other man's ox."

The reader is supposed to be thoroughly conversant with his art; particularly so with that special branch or collateral science to which his time and attention are exclusively devoted, in which he has spent many weary years of study, and to which he still devotes weary hours of ante-preparation. To cheapen himself is to cheapen his art and bring it into disrepute.

The motive of the writer is to give such practical information as shall especially enable the office physician quickly to take the measure and determine

the temperament of the individual presenting himself for consultation; "to size up" and grasp all the features of the situation which may aid him in favorably impressing his interviewer, and in leaving no part of his professional make-up open to wary thrust, or clever by-play on the part of the prospective patient, that may defeat the getting of the case and the securing of the fee.

It is well understood in the legal profession, that when the time for settlement between attorney and client arrives, the advocate and counselor assumes the antagonistic attitude toward the client, whose interests he has defended against the attacks of all others. The client must then put himself upon his defence or his interests will be unprotected. In other words, they are no longer friends, nor are they, indeed, enemies; their transaction has become one of mere business apart from all sentiment.

The sagacious medical man must not overlook the fact that the prospective patient usually assumes a like antagonistic attitude, and he should govern himself accordingly.

Several instances recur to the mind of the writer in which the patient donned the garb of indigence in order to be placed under treatment for a nominal sum, when it was subsequently discovered that he was amply able to pay a liberal fee. In many instances, those practicing this deception were persons of more than ordinary wealth and station.

This is quite common in free clinics, which some

wealthy people attended in disguise, to save in medical services a tidy sum to be squandered in the whirl of society.

A New York dentist once "evened up" with a wealthy society lady, whose disguise he penetrated at a "free tooth drawing." He extracted the wrong tooth, a beautiful pearly front one, by mistake, of course. An apology and, "Oh, well, in your social position, it does not matter whether you have beautiful teeth or not." What could the "lady" say? She dared not expose her penuriousness, so it cost her a pretty penny to have that tooth reinstated. Was it cruel? Of course it was—to the dentist—it hurt him terribly to be obliged to give such a lesson.

The science of case-taking and fee-getting, and the solution of the various practical problems that undo the unwary and inexperienced physician in the consultation room, will receive due attention in their proper place; here it is sought to impress upon the reader's mind that the elements of financial success are multifarious, and their careful study has as many features to fascinate, as well as to prepare the medical counselor for personal professional interviews with all classes and types of afflicted humanity. One, point, which is different in the case of the other professions, should always be borne in mind, which is, that a physically afflicted person is generally mentally distressed, and as the

saying goes, "does not always know what he is about."

Then, too, there is another point that merits attention, and must be guarded from all directions. It is a well known fact that to take a physician directly from the midst of a general practice and put him in charge of a specialist's office, is to invite failure, no matter how competent he may be to treat patients for their ailments. It is not that he does not know how, or that his skill is not sufficiently pronounced, but there is a certain routine, a certain amount of tact that is not essential in the rough general practice, which cannot be grasped without some training and experience. It is not to the discredit of a great civil lawyer that he knows nothing about the practice in criminal cases, and vice versa, for it is impossible for the human mind to grasp every particular branch of any science.

On the principle that "it is difficult to teach an old dog new tricks," it is nearly always impossible to get old time, dyed-in-the-wool conventional medical men to grasp particular practical methods of doing business, as they apply to the modern practice of medicine, however anxious they may be to learn the ways of wisdom.

There is a vast number of details, an accurate knowledge of which is requisite to the successful management of a medical establishment, or institution that is patronized by a mixed class of afflicted humanity, the commercial or business manipulation

of whom is as important as the skillful treatment of their diseases.

Those who are most likely to benefit from the study of this subject, are those who are in pursuit of the information necessary to conduct successfully, or to manage professional offices or institutions. There is a great and constantly increasing demand for such talent, and it is ventured here, that no matter what the line of practice he has been engaged in, the physician who will give the subject of this treatise careful study will be enabled to eliminate from his demeanor and custom, in the consultation room, business-disparaging conventionalities, which vogue can never justify, and which deprive hosts of doctors of the liberal patronage and financial returns that may be justly theirs in the future.

While it is not possible to discuss here every minor detail of case-taking, it is the aim of the writer to consider the eminently practical points, the observance of which has enabled numerous physicians to be successful and up-to-date in every particular.

Before taking up the details of case-taking, it will serve a good purpose to consider first the mutual relations that exist between physicians and the general public.

CHAPTER V

PHYSICIANS AND THE PUBLIC

Why, then the world's mine oyster
Which my scalpel will open.
—Shakspeare Remodeled.

THE physician occupies a dual relation to the public.

First—That in which he labors for the welfare of others.

Second—When he labors for his own welfare.

While his labor is often of a self-sacrificing nature, it cannot be denied that when he has discharged the duties and obligations devolving upon him as a public exponent of medical or surgical science, it is proper for him also to discharge the duties and obligations of a personal character—those demanded of him by the ones who look to him for their material support, and for the current necessaries of life.

Medical science is a field in which, while votaries of the science are devoting their time and skill to the service of others, they are also toiling in unison with the rest of their fellow men, with a common

sense view of ultimately reaping the legitimate rewards for their labor. This fact, without further argument, ought to prevent too roseate a view of the calling of medical men, one which should never be taken of any of the disciples of Esculapius. There is no halo or glamor surrounding the practice of medicine, other than there is around any other profession involving the question of public as well as private duties. Physicians are not unlike other men in general, and modern progress forces upon our notice the fact that because a man is devoted to the medical profession, he must not be considered above his fellows when considered from every standpoint. As an able writer says:

"The medical calling, considered purely as a calling in which the physician manifests the selfish side of life, selfish in the sense and to the extent that he lives for himself as distinguished from others, stands on the same footing and sustains the same relation to the community and to the state as any other calling. Physicians are not entitled to any special privileges and should receive none on their own account."

To this it may be added, that physicians themselves desire to be measured upon the ordinary human standard. To expect more, or to do more, would be to expose them to different ethical rules, which is the very condition the author is contending against. To establish any man upon a superior plane is to apotheosize him and compel him to diet

on angel food when his appetite craves grosser material.

Being human, therefore, he encounters the same cold blasts of the world as his fellow men, and in many instances that wintry wind is not tempered as it is to the shorn lamb, for he is at the mercy of others—frequently fleeced, and financially frost bitten. He encounters that prevalent evil of the world, the lack of common honesty to settle financial obligations. A dishonesty that appears in protean shapes which permeate the social mass, and come so alarmingly near to the border line between honesty and roguery that it is difficult to say where one begins and the other ends. Sometimes the question of honesty and dishonesty requires the services of a court and jury before it can be accurately determined. Everybody knows that it is equally as dishonest to withhold the money due a laborer or a creditor, as it is to steal, provided, of course, the ability to pay the indebtedness is adequate to the discharge of the debt.

In the general scramble to get ahead in the world by beating somebody out of a just debt, the innocent suffer, and of all classes at the mercy of this debauched system of dishonesty, physicians are always the last and most grudgingly paid—not at all, if there be any way to avoid it. If the reader will read in Esop the fable of the countryman who warmed a frozen adder back into life, he will find an apt illustration of the meaning here sought to be

conveyed, and also the reason why physicians above all others are considered fair game for dishonest practices.

Contingencies are constantly arising whereby he is cut out of his just dues. A common one in general practice, where it is difficult to demand an advance fee, is when the physician lays the foundation for a cure, plans the structure, and has it well under way, when some meddlesome, alleged friend puts in his oar gratuitously, and succeeds in effecting a change of physicians, even an entire change of treatment, without deeming any renumeration for the ousted medical adviser worthy of consideration. This action is often taken without giving the attending doctor the least warning, and he often calls upon his accustomed rounds to find a new physician duly installed. Of course, there is nothing for him to do but submit, for the right to change physicians is as undoubted as that to change religions, or grocers. There is this difference, however, in the case of a foolish change of physicians: The patient's malady is aggravated, and he is often hurried out of the world. It is a dangerous thing to do when life hangs trembling in the balance, but it is, painful to say, too common, and that too at a critical period in the case.

It is this course of so-called friendly advice that has filled many premature graves, for which the physician is made the scapegoat. If, upon the door of every sick chamber, were posted in legible char-

acters, large enough for him who runs to read, the device.

"From all fool friends, good Lord, deliver us," there would be a marked decrease in the average death rate. Attention is particularly called to this aggravation of the sick room, in the hope that there may be fewer victims, and fewer bereaved friends, whose only excuse is similar to that of the crank with the gun who shoots his dearest friend: "Didn't know it was loaded."

What possible difference can it make to a man who intends to pay his bills, whether he pays before or after the service has been rendered, inasmuch as the price will be the same? The only difference there can be is that the doctor can not lose his fee when paid in advance, and he is better disposed to perform extra service that his duty would not require him to perform. It shows well for the medical profession that they are single hearted in the practice of their profession and do not possess a scintilla of vindictiveness. In any other profession he would be made to suffer for his penuriousness or dishonesty. Men have often lost their church membership through failure to pay their pew rent; many a good lawsuit has been lost through failure to properly fee the lawyer, and a man in business who repudiates his bills is quickly put hors de combat, or thrown into bankruptcy.

A queer case of beating the doctor is related in

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the law reports, and it illustrates what has just been said:

One of the cunning sort, whose wife was very ill, made a pat bargain with the doctor that he would pay him a certain fixed fee, "kill or cure." At it, therefore, the doctor went, and extended his treatment over a long period, being withal, very assiduous in his attendance, but the woman finally died. In due course of time, the doctor sent in his bill for the agreed amount. He was met with a refusal to pay a single cent of it. Indignant, he sought his creditor and demanded the reason for repudiating the debt.

"Did you not agree to pay me the amount stated in my bill for attending your wife, kill or cure?"

"I don't deny it," blandly answered the delinquent, "and I am ready to pay according to the contract. Come, now, doctor, did you cure my wife?"

"Of course not, since she is dead," admitted the doctor.

"Well, then, can you say that you killed her?"

The bill was never paid, but the doctor learned something about the law of contracts after a court had decided that he was bound by his agreement.

It might be well for the whole world if the antithesis of Robbie Burns' poetic prayer were true:

"O wad some power the giftie gie us
To see oursel's as others see us!
It wad frae monie a blunder free us,
An' foolish notion."

Every man can introvert his gaze, but what he sees within himself is guarded behind a dark curtain through which there are no peep holes for the outside world. If men could withdraw that curtain and see its grinning skeletons, peer into the lives and motives of others, scrutinize consciences and Jekyl and Hyde characters, read other men as in a book, what astounding revelations of human mendacity and criminality would be unfolded before his amazed eyes, and what an astonishing revolution, reform, and remodeling of human conduct there would be! 'Tis bad enough from the standpoint of the student of human nature taking observations from man's exterior, but were mind reading as simple and easy, men of brains would become hardened pessimists and ferocious misanthropists. We are being carried along, however, by a mighty impetus that is threatening to rend the veil before the temple of human duplicity, dishonesty, cupidity, and generally warped psychology.

That mighty impetus springs from the inertia of the demand for compensation. That every individual should receive all the reward which his ability, his industry, and his opportunities can secure for him in a legitimate calling honestly and faithfully pursued, is a self-evident proposition which has no exceptions.

This is the great pivotal point upon which the entire industry of the whole world turns—this one great radical, essential preservative of the social

mechanism—compensation. The principle that the laborer is worthy of his hire has passed through a long period of obscurations, when might usurped right and the lash of blue-blooded aristocracy held genius and ability in subjection, subservient to its own caprices. The brightest minds of antiquity wore the badge of slavery, many of them the cap and bells of jesters to amuse noble, tyrannical ignoramuses.

In later ages, the petty baubles of laurel wreaths, annuities, office, decorations, and honorable mentions, were the sops thrown to the Cerberus of awakening genius in isolated instances. The rank and file of worth, merit, and ability was relegated to impoverished garrets, filthy back alleys whence, and amid the suicidal fumes of charcoal, it sang a paean of individual triumph, the refrain of which the people of the earth caught up and in a mighty chorus dinned into the ears of perfumed patronage, until the latter bent before the blast as a slender plant before a storm.

What is the meaning of the stupendous labor movement that is bringing the world out of a long sleep of laisser aller, or rather devil-may-careism? It is the rebellion of man against the domination of voluntary rewards, and the re-assertion of the right of worth, merit, and ability to an adequate compensation. The heavens are flooded with an aurora borealis of prosperity, and all men are reaching out to grasp its brilliant coruscations. The trumpet-

ings of prosperity mongers may be a trifle brassy and windy, but there is enough substance to revive the economical idea of distribution in the shape of compensation, and even if mostly gammon, they have subserved a good, a progressive purpose.

In the midst of so astounding a financial progress, so startling a reversal of the principles of social economy, can it be expected that physicians will rest content with their every day application of the precepts emanating from the Golden Rule? Is it consistent that he, and he alone, with his vast opportunities of benefiting humanity, should be restricted to obsolete, senseless rules of antiquated ethics, dry-as-dust customs, forms, ceremonies, and hampering restrictions? Must he alone live down a well, wrap himself about in a shroud of obscurity, detract from the volume of a patronage that should be attracted to genuine ability, regardless of age, live like a clam buried in the sand, or like a lobster in a dark hole in the rocks, awaiting to be fortuitously dragged out by some adventitious bait? And, if so fortunate as to be fortified by an adequate list of patients, why should he not embark upon the rapid current of prosperity and augment his fortunes?

A fortiori, and with measurably stronger prospect of success in the practice, special or general, why should he not observe that eminently sensible and practical rule: "Where business begins friendship ends"? Success begets success in the practice of medicine as well as in any other profession.

The disposition to hail all that is practical and best in the science and art of medicine and surgery and their collateral branches, and so welcome the elimination, even the destruction of chimerical customs and ethical rules relating to patrons and professionals, is most welcome to all with common sense perceptions, and who are actuated by a sincere sentiment of reciprocity and justice to themselves and their families, as well as by charitable motives toward all mankind.

In the olden times, the "good old times" of rigid ethics, when a man took his wheat to mill to be converted into flour, he put his grain in one end of a bag and a big stone in the other so as to balance the weight on his donkey's back. His son did the same after him, and his son's son, and so on, in the same old manner as the sins of the parent are visited upon his children even unto the third and fourth generations. Did anyone think of getting rid of the useless weight of the stone and distributing the wheat at both ends of the bag? No, God forfend such a sacrilege! When forks were introduced in the time of Queen Elizabeth, a great cry of sacrilege was raised by those who used their fingers. "It is a violation of the law of God," quoth they. And in like manner, when the advocates of antiquated ethics saw Fulton's first steamboat plowing the waters of the Hudson river and vomiting black clouds of smoke they fell upon their knees in terror, crying out: "It is a wicked thing, an inven-

tion of the devil, a sacrilege, 'tis the Beast of the Apocalypse." The earth does not travel around the sun," declared the guardians of Mediaeval ethics, but we moderns exclaim with Galileo: "E pur se muove." Indeed, the times have changed "et nos mutamur in illis."

It does not require a very sharp eye to note that the least overburdened with proficiency, are the most emphatic in their maintenance of the Gradgrind species or dignity and time-worn regulations. They feel the need of skilled professional backing, and are, indeed, compelled to resign to others of their less dignified and autocratic, but more competent brethren, the actual work in grave cases calling for the skillful application of approved, well tested, modern medical and surgical methods, guided by cultivated brains and expert fingers, moving with tact and wisdom.

Then again, where are others, but a trifling legend will explain what might be said with sufficient clearness:

A certain man was in the habit of fattening several hogs for winter killing. When the chilly blasts of November roughly caressed their tender skins, they generally huddled together in a row under the barn among the straw and chaff that had accumulated there. This left one side of each outer hog exposed to the cold, but their ingenuity, perhaps their instincts, rose to the occasion. Every few minutes one of the outside hogs would quietly

and cautiously arise and force his way into the warm center of the row where he knew he could keep warm on both sides. Of course this was not accomplished without considerable disturbance and grunting protests, but it seemed to be an understood thing among them, that all should take turns in acquiring warmth in this manner, hence their protests never attained the proportions of a revolution, and they continued to remain where they were instead of hunting a new spot where they would be undisturbed. The man's little boy used to watch them with great pleasure and curiosity, and he reached the conclusion, that although hogs, they were truly imbued with some sort of brotherly affection and regard, inasmuch as no single one attempted to monopolize the warm spot. With such sentiments, the little boy's tender heart was filled with sorrow to think that such noble creatures should have to be killed before being of any use, so he approached his father on the subject.

"It would be a pity to kill such magnanimous creatures," said he to his father after relating his observations. But the father had also studied hogs from a different point of view, and his answer was more in accord with his more recent ethical knowledge.

"Pshaw, my son," he replied. "They are only hogs after all is said, and of more use dead than alive. Do you not see that by their continual round of crowding in and out of the warm spot, none

of them ever gets settled down into a protracted comfortable condition? Besides, it is the only exercise they take, which accounts for their tender skins and their fat."

The people have learned to respect ability. They are no longer impressed by "stunning side whiskers," Prince Alberts, spanking turn-outs, or machine-made mannerism. They demand positive capacity, and when they know a professional man to be a thorough therapeutist, or surgeon, they do not care whether he comes to them on foot, prances up to their door on a charger, or rushes to their rescue in a gasoline coffee mill. Little reck they whether he be clad in the stunning raiment of one of Solomon's lilies provided he is cleanly and presentable. Pre-arranged calls from church or Sunday school, reckless driving toward some unknown destination without any patient at the end of it, and the various and sundry tricks of bygone days when professional ethics were looking the other way, may help in some remote rural region where "gold bricks" are a staple article, but the epoch is fast approaching when demonstration of the possession of actual capacity will be the prime requisite to success for those who enter the profession.

Positive diagnostic, therapeutic, and surgical skill are now rapidly supplanting old time conventionalities among all enterprising, modern medical men. Tact is taking the place of blundering and floundering, and the profession of medicine has had added

to it a profound post graduate course of studies into human nature.

Old Doctor Agard of pleasant memory to many, was a man who understood human nature in all its vagaries. Whether the patient was in his normal mental condition or crazy, he knew just how to manage him, and he always met with success. He once had a patient who gave him a great deal of trouble, moreover he was a worthless coot. Well, this man on recovering from a prolonged debauch, or "spree," to make it clear, fell into a mild stage of mania a potu, during the paroxysms of which, instead of seeing snakes, he imagined he was a salamander. Being in the dead of winter, a great old-fashioned box stove was used to supply heat, and into it, when its great yawning door was opened, were thrust half a dozen full sized sticks of cord wood. It was, in fact, a fiery furnace large enough to hold Shadrach, Mesach, and Abednego, with plenty of spare room for them to move around in. Now, the patient wanted to get into this furnace and show his powers as a salamander. Every night, he made numerous rushes toward it, exclaiming: "I'm a salamander! I'm a salamander! Get out of the way and let me into the fire!" He was so violent in his demonstrations to show his power to withstand fire by crawling into the red hot stove, that it required four men to hold him back. It was exhausting work, and the watchers asked Agard to do something to cure him, which

he agreed to do. So, one night the doctor remained up with the patient, and studied the phases of his delirium. After the patient had made several attempts to play the role of salamander, and the watchers were dripping with perspiration from their labor in keeping him from it, Agard made up his mind what to do.

"When he gets another attack," he said, "you let him alone. Do not hold him back or touch him unless I tell you to. I think I can manage him alone."

By and by another attack did come on, and the patient leaped out of bed making a bee line for the hot stove, which was full of live coals. Nobody made a move to stop him. "I'm a salamander! I'm a salamander." he yelled. The doctor was ready for him, and flinging wide open the furnace door, grabbed the patient by the back of the neck and began dragging him into the fire. "Get in, then you d——d fool, and we shall see whether you are a salamander or not?" at the same time pushing him near enough to singe his whiskers a trifle. But the lunatic drew back at this point, and looked up into Agard's face with a leer, saying: D——d fool, yourself," then went back to bed where he fell asleep and made no more attempts to be a salamander.

It is true, as Pope says: "The only proper study of mankind is man," but it is also of vital interest to the physician to study the propensities of man from every point of view, responsive and irresponsive, as well as to endeavor to solve problems pertaining

to his psychological and structural organisms, and thereby guard himself against the prevalent reluctance and failure of patients to honorably discharge their monetary obligations to those who combat for them the destructive agencies of disease, or lessen the havoc of surgical malady or injury.

Two things must combine to render the labor of the physician profitable to himself as well as beneficial to his clientele: services and compensation, the latter always being a pardonable desideratum. The deeper man is studied, the more certain is the diagnosis in any given case. To reduce mistakes in diagnosis or therapeutics to a minimum, is to avoid those blunders in practice, which, aside from those appertaining to the adaptation of treatment, the commission of which is fraught with fatality, and not only that, it puts the perpetrator practically out of the profession when considered from a business or commercial point of view. In the search for pearls in practice, it is as important for the physician to qualify himself against blunders in commercial diplomacy, in plain language, to protect himself againt financial mistakes, as it is for him to fit himself by care and study, to scientifically and skillfully prescribe or operate. As it often happens, the practitioner seeks for pearls in strange places, in pools where pearls are not to be had.

In truth, 'tis not for pearls he always seeks
Where pearls are found, but in some pool
that reeks

With empty shells. He stirs the mud
Expecting gems of purest ray,
That in the sand long buried lay,
Will be to him full recompense;
But vain his toil, his common sense
At fault, he nothing finds but—mud.

This matter may not appeal to the medical man who is already a success, but it is important to those who have just been born into professional life, and who have imbibed some philosophical idea from the usual ethical formulæ, that they must hide their light under a bushel, instead of going out like the early bird to get the worm, or to those who have failed to reap a harvest through a lack of the requisite diplomatic tact, or savoir faire in securing patients and fees. The question is not "work always," but work for compensation. How otherwise is it possible to live under present modern conditions? "The battle is not always to the strong or the race to the swift" is an elegant saying that rolls glibly from fossilized tongues, but it smells of the mustiness of past ages, and it is untrue in our day and generation.

Sometimes a spectacled vision drifts from the ancient catacombs and says: "Everything comes to him who waits." It is a false rendering of a true proverbial saying. What was said about

waiting is: "Everything comes to him WHO KNOWS HOW TO WAIT." It is to be hoped that the difference will not require explanatory notes, or a surgical operation.

CHAPTER VI

A LEADER OR A FOLLOWER

"Self-preservation is the First Law of Nature."
—Legal Maxim.

IT is assumed that the physician starts out in practice of his profession well equipped with everything pertaining to a knowledge of the science of medicine, except actual independent and unassisted contact with the infirm world, and experience in the details of its maladies. It must also be assumed, inasmuch as it is an essential part of his success in his practice, that he keeps himself abreast of improved methods in surgery, carefully studies new remedies and their therapeutical effects, and rigidly scans new treatments from whatever source they emanate, to ascertain whether they produce beneficial or detrimental results. In the former case, it may be advisable to adopt them where applicable and they are not wholly experimental; in the latter, he will of course, set his face against them if an angel from heaven should urge him to accept. He must never forget that he stands upon the threshold of a vast scientific domain, one

in which he can find abundance of certain material to employ for the benefit of humanity, without being compelled to wander off into some uncertain by-path of empiricism.

He will be met with that universal outcry from morbid minds, who have crammed their brains with encyclopedic information, written by "compilers" for some cheap publishing concern, that is engaged in spreading so-called "information," that this is an age of great progress and that science has progressed along with commercial money making. In addition to that, he will read in every newspaper, the senseless articles of lay male and female writers, urging upon a deluded public the astonishing news that it is the "progressive physician" alone who succeeds, and by progressive physician is meant one who abolishes the knife, throws away powders and pills and goes in for quackery based upon scientific discoveries in mechanical and chemical appliances. Here is the idea sought to be inculcated by the blind writers who are leading the blind: "The world moves—and it is moving rapidly away from the old school of medicine. You must broaden out and accept new methods; you must give the world what it wants. Humor it. The people of the earth will be better and you the richer for it."

The reader will observe that this is the equivalent of the idea that "every man should be his own physician," and is really a thinly disguised en-

couragement of quacks and patent medicines. Wherefore be on your guard against this pernicious scheme to foster charlatanism. Stand upon the broad ground of your profession, a profession that is the very essence of progress in itself, but so little known to those who have not made it their study, that they advise the comsumption of deadly doses of common table salt as a means of prolonging life, because some college professor prolonged the life of a frog by its use.

Here is the parting of the ways between the physician and suffering humanity. He must either be a leader in his profession, shine as an expert in the treatment of diseases, and succeed in relieving humanity, or be a mere follower of public clamor founded upon ignorance, enhanced by rattle brained advice, and prolong the miseries of his patients by "giving them what they want." The author insists, and this book is based upon that insistence, that is, that a physician is as worthy of his hire as any other profession, but he discountenances the making of money by any such prostitution of a noble science to the vox populi, and diseased mental expectations based upon quack advertisements of patent medicines. As a leader, the physician will succeed in the same manner as a leader in any profession or occupation; as a follower, pandering to the foibles and whims of his patients, he may apparently succeed and make an envious showing, but the time is not long coming

when self-preservation will drive every patient into the derided "regular scool" for a cure. It is like religion: The suffering soul hears all around him: "Here is the Lord; there is the Lord," but when he comes to be in extremis he looks away from the sensational banners for the meek and lowly apostle who can save his soul. In the case of the sick man, the "fireworks" of empiricism and quackery possess no attractions; he feels in his soul that the truth does not exist in senationalism, froth and bubbles, and he seeks the solidity of the "regular profession," trained to the truth and away from mere experiment, and the glamor of "Get-rich-quick" medical concerns exploiting barrels of universal specifics of "rapid-cure treatments."

There are two phases of self-preservation, one pertains to the patient and the other to the physician. Both are equal in their qualities as necessary elements in human life; both form but one law of nature, and the canons of interpretation are the same in both cases. The patient applies to the doctor by the operation of that law, and the doctor takes his case with a full understanding that it is through the operation of that law that the sick man seeks him instead of going to a veterinary surgeon. Now the doctor must impress upon his patient that this law of nature works both ways, that is: The physician must draw some advantage from it as well as the patient, there must be reciprocity of sentiment in that respect, or a cure is

far off, if not impossible. The patient knows, or he ought to be made to know, that the doctor has something at stake when he takes a case as well as the patient. His science, his skill, his reputation, his profession, his entire life are at stake in aiding his patient to fulfill the law of self-preservation. He knows what his science, skill and knowledge can accomplish, and he does not know whither the caprices of his patient will lead him. Following them, or public clamor, the doctor becomes a traitor to his knowledge, a sinner against his own convictions, and a panderer to a diseased imagination.

Personally, the writer would not think of taking a case if the patient were to have a hand in dictating the treatment, or even suggesting what should be done. There are cases, however, where a patient is misled by others, as will appear elsewhere in this book, and when added to this pernicious habit of alleged friends is the knowledge in the doctor's mind that the mental condition of every ailing man is awry, it is his plain duty, if he can cure him, to take his case, if all the requirements have been otherwise complied with, and follow his own skilled judgment although the patient supposes the treatment to be something else. If it be legitimate to permit a man to rush to his own ruin by deceiving him into the belief that he can be cured, it is not a saintly virtue to save him by common sense and honest treatment?

A sick mind, a diseased mind is not a reliable adviser; it must be a follower, and the hand that assuages it must lead. "A man is an ill husband of his honor that entereth into any action, the failing wherein may disgrace him more than the carrying of it through can honor him." It is insisted that the doctor who is a follower soon becomes relegated to the background of respect, and his attainments derided, though he possess the ability to raise the dead.

To again quote the philosopher: "If a man perform that which hath not been attempted before, or attempted and given over, or hath been achieved, but not with such good circumstances, he shall purchase more honor than by effecting a matter of greater difficulty or virtue, wherein he is but a follower." But there is this to be added upon this question of honor, or, as it is more properly called at this age of the world, "réclame." "Boasters are the scorn of wise men, the admiration of fools, the idols of parasites, and the slaves of their own vaunts."

What secret motive impels a young man to devote his life to the medical profession? Ask any member of the profession and he will answer: Because it is an honorable and high calling; a science whose vast, illimitable attainments afford scope for a progress which never reaches its confines. It is a domain in which the human mind may wander at will, free from the bigotry and restraining dog-

mas that are the necessary evils of the other professions, of the law and of the gospel. Moreover, deep in the heart of every student who runs his course and adopts the life work of curing human ills is the idea of humanity. As a profession it stands at the head of all others; all others are subservient to it, inasmuch as all the others bow down before it at times and recognize its supremacy.

There is also the remunerative idea. Having taken the medical profession out of the sacred circle of the priesthood, and having forced it to abandon the free-will offerings and altar gifts, the question of remuneration is highly pertinent. It is also an adaptation of the law of self-preservation. It is a profession of honor and profit, one in which the highest ambitions may be realized, whether in science, politics, or anything commensurate with the rights and privileges of a man. This is made the subject of another chapter, entitled "The Doctor in Politics," and it is alluded to in this place merely to enable the reader to keep in mind the patent fact that he is entitled to all of the rights and privileges of a human being operating under the egis of the law of self-preservation.

There is the doctor's future to be taken into consideration, the inevitable "rainy day," which comes to all men. That unprovided for, the world bestows but cold comfort, and treats the doctor as the old woman did her cat as Florian relates. The application will be obvious:

but cold comfort, and treats the doctor as the old woman did her cat as Florian relates. The application will be obvious:

An old woman's cat, grown old and frail,
  Its teeth and claws worn out,
No longer pursued the mice and the rats
  That fearlessly scampered about.
    "Alack-a-day!
    What good are you, pray?"
  Quoth the ancient dame to her cat.
    "I'll chop off your head;
    Get a new cat instead,
  Since you can't catch a mouse or a rat."
"I pray you, dear madam," the old cat cried,
  "Consider the service I've done.
To put me to death would ingratitude be,
  A foul deed—a worse one there's none."
Said the crone: "Quite true; I admit all you claim,
  But I find rats and mice everywhere.
Get them to consent to keep out of the house,
  And your life I gladly will spare."

Suppose the doctor follows the advice of Saint Paul? To marry and raise a family is made the duty of every citizen by no less an authority than the President of the United States. Shall the doctor refrain? The philosopher says:

"He that hath wife and children hath given hos-

which they know they must transmit their dearest pledges."

This one condition demands a broader and more intelligent application of the law of self-preservation in the doctor's life than any other. He finds in his wife a helpmeet and companion, a sympathizer with the afflictions of others, and she spurs him on to many a good deed that he might otherwise have overlooked in the hurly burly of his practice. No need to say that she must be provided for, or that when little pledges of affection come to the pair they also must be prepared for the future. They are what nerves his arm, calls for the exercise of intelligence in his business matters; they are a part of himself, and of this every patient should be made to understand. "He that provideth not for those of his own household hath denied the faith, is worse than an infidel."

But whatever be the social condition of the physician, whether single or married, it is time for him to take his stand as a member of the only humane profession in the world, hold his head high and demand recognition. There is more than the individual physician concerned in his bearing in this respect; the entire profession is involved in his conduct and in the manner in which he carries out the objects of his life work. To cheapen himself is to belittle the almost sacred character of his calling, and when belittled humanity becomes doubtful of its saving qualities or of its healing

power. The world has already made a mess of the medical profession by its misapplication of education, a misapplication which, founded upon some fancied connection between humanity in general and the political rights of citizens, fancies that because one man is as good as another in the political scale, he also knows as much as another. A fallacy which is demonstrated every day in the case of the medical profession by rapidly filling graves. It is said: "Lawyers' mistakes are hung on gallows, and doctors' mistakes buried beneath the ground." It is witty to say so, of course, but there is reason in the saying and much groundwork of truth underlying it. People attach respect for a system to the inidvidual, and with every doctor a leader, and never a follower, the profession will be treated more respectfully, and the doctor regarded as worthy of more consideration. "Palmam qui meruit ferat."

CHAPTER VII

CASE-TAKING

"Be wisely worldly, be not worldly wise."..... —Francis Quarles.

THIS compound word, "case-taking," embraces everything significant of securing cases and fees.

A well-remembered specialist, who flourished some twenty years ago, whose receipts annually amounted to sums expressed in six figures, and who was a past-master in the art of taking cases, said to the writer:

"When I fail to land a case I always carefully review the conversation mentally, and I do not feel satisfied until I have determined what I have said, done, or left unsaid or undone, that has lost me the patient's confidence, the case and the fee."

The disappointed case-taker, especially the novice, is often heard to remark, as the door closes behind his visitor, "That case will return." On the contrary, this rarely happens. Other specialists are consulted and surrender is prone to occur to a superior case-taker who charges larger fees, or

to the financial concession of a less able and less scrupulous physician.

The practice of lawyers, under similar circumstances, is a good one to follow. No lawyer ever permits a client to get away from him. Every man who comes to consult him is mentally sized up into one or the other of two categories before he has broached his business; his visitor either has some money or he has none. If he has no money the lawyer expresses his sorrow at being very busy at that particular moment, and asks his would-be client to call again next week, unless it be a "humanity" case, and then he gives a sigh, but listens patiently. But if the client is sized up as the possessor of the coin of the country, the next problem is to calculate the size of the wad. Of course this is done instantaneously; it becomes instinct after a little practice. This accomplished, the lawyer gets some of that money, sometimes more, sometimes less; but, whatever the amount, he gets some, and then he listens to the tale of woe or horror. When the client departs, the limb of the law knows he will return, for nobody ever heard of anybody paying a lawyer any money without getting the worth of it in services. It is the same with a doctor. It is a case of "Get your money's worth."

In the line of case-taking and fee-getting no one is infallible, but some have ability far in advance of others. However, certain principles underlie

success in this practical aspect of practice which may be mastered so as to render physicians of average ability capable in this field, and spare them the disappointment of failing to land first cases and the good fees which await harvesting by wide-awake medical counselors.

The story is old but worth repeating to a new generation:

A young doctor once hung up his shingle in a small village where there was only one doctor, an old practitioner who had been practicing there for over a generation without any competition—an ill-advised thing for the new graduate to do, many thought it cheeky, but the old practitioner said it was a case of enlarged "gall."

However, the young doctor was "nervy," and, in spite of his failure to get a case, preserved his good nature and equanimity. The older medical brother usually grunted when they met, and in a mocking tone of voice never failed to ask:

"Well, doctor, how many new patients did you get to-day?"

To which the response always was: "Oh, three or four." Whereat the old man would give another grunt, for he knew every man, woman and child in the village, kept track of them, in fact, and was well aware that there were no new patients to be had unless they flew in after dark and flew away before daylight.

By and by it was noticed that every morning

early the new doctor would hurriedly jump into his buggy with an instrument case and drive furiously out of town, sometimes in one direction, sometimes in another.

The old doctor, though suspecting this to be a mere ruse, became alarmed when this "rushing" business of the new doctor grew to be town talk, and, fearing that the youngster might be quietly "stealing" patients among the neighboring farmers, set a man to watch him and report where he went.

Accordingly, the next morning the young doctor jumped into his buggy with his instruments, as had been his daily custom, and drove rapidly out of town with the spy after him.

Now it happened that a farmer from a neighboring town, on his way to the village in question, had fallen out of his wagon about six miles out and broken his leg. Without a moment's hesitation, the young doctor jumped out of his buggy in a quite natural way, as if he had been specially sent for, bound up the injured man's wounds secundum artem, and drove him home. The spy reported the matter to the old doctor, whose astonishment at the young one's mysterious manner of getting good cases from right under his nose induced him to take the newcomer into partnership, finally leaving him all his business and a clear field.

Of course this was a pure case of luck, but was not the young doctor a diplomat? His was a violation of old time ethics, for he should have sat and

eaten out his heart with waiting for quails ready roasted to fly into his mouth. But he was not of the kind to wait. He went after the game until he got it. Moreover, he knew that success could only be attained by racing after it, and that when he should have attained it everything would come his way.

While many minor principles may be learned by experience only, others may be made familiar to the inexperienced physician, and to the practitioner also who has disparaged his chances of success by a disregard of commercial diplomacy in medical practice.

It is presumed that every physician who reads this wishes, first of all, to have at his command diagnostic and curative power of superior quality, and that it is the ambition of all honest and fair-minded practitioners and specalists to accomplish all that is possible with the most advanced modern means and measures of scientific treatment.

"Hitch your wagon to a star," is Emerson's advice.

CHAPTER VIII

PROSPECTIVE PATIENTS

Medical Examiner to Student: "What is the first thing you would do if a man were blown up by gunpowder?"

Student Seeking Diploma: "Wait for him to come down."

THIS is the leading subject because it embraces all that relates to the first acquaintance and first impression. The very first conference usually determines failure or success to land the case, it is an essential element in case-taking, or, as it may also be called, "case-getting."

There is one point that every practitioner should always have in mind in his dealings with the general public, that is, with the usual run of prospective patients who drift into his office to consult him; people in general have somehow imbibed the idea that every physician is running a bargain counter of "cure-alls."

Not only in his office, but these people he meets everywhere, and in the most incongruous places. As soon as the personality of a physician is identi-

fied, it matters little where he is, he is certain to be button-holed by these bargain hunters. At a theater, a reception, a restaurant, ball, party, or wherever a physician's tastes or inclinations lead him, the ubiquitous "cheap skate" after something for nothing, or at reduced prices, corners him. Even upon the street he is not safe.

Mrs. G., who possessed a winning smile, and a prominent set of gold filled "uppers," which she took pride in displaying, one day down town came upon Doctor S., whom she had met for the first time at a reception, and stopped him to continue the acquaintance. After the usual remarks upon the weather and the party of the evening before, the lady expanded her face into a lovely smile, and beaming upon the doctor, said:

"Doctor, my little Charlie is suffering from a very bad throat. He coughed nearly all night long, and I am very much alarmed at his condition. Now, what would you advise me to do for him?"

With a smile as elastic as the lady's, the doctor saluted and passed on after remarking: "I would advise you to send for a doctor, Madame." Did he lose a patient? If he did he was not out a fee, which probably gratified him more than if he had given gratuitous advice.

It is not difficult in the majority of cases to recognize this class of would-be patients. They are the same kind of people who try to buy a bill of goods at a grocery on credit. The wise tradesman

can spot them as soon as they enter his door. They betray their character by their manner and speech, particularly their questions. Instead of waiting their turn in the ante-room, they want to get in ahead of anybody else; when they do get into the consulting office, they beat all about the bush and consume an unconscionable amount of time; talk against other doctors, try a little flattery, and wind up by propounding a supposititious case.

"A friend of mine was troubled with that complaint, and Doctor Jones gave her (please notice the 'her') such and such medicines. Do you think that was the proper treatment, doctor?"

Brother Medico, if you should be deceived into saying "Yes," then your prospective patient would vanish with "Well, I feel so much better just talking to you, so I think I will wait until to-morrow before consulting you." Watch her and you will find she has gone into the nearest druggist's to have her friend's prescription filled for her own use. These things are exchanged among friends, and one fee made to go the rounds of a dozen patients. This is no fancy sketch, but a reality taken from the diary of an old practitioner, a successful one, by the way.

The one decisive way to nail this kind of butterfly patient is to demand an advance consultation fee, or "Pardon, me, sir, or madam, I must ask you to give way to my regular patients." In six cases out of ten the consultation fee will be forthcoming,

if your visitor is a man, and you will be admired for your business ability. When a man is beaten at his own game, he gives up gracefully and considers it a good joke. In the case of a woman the percentage of surrender to the fee demand will be about four in ten. If you are so situated, the very best plan would be not to admit any one into the inner sanctum until a consultation fee has been paid your clerk, a fact which his receipt will show. But of course such a method comes later on; at present we are dealing with beginners in the art.

When, however, a probable patient finds his way into your office, holds out his arm to have his pulse gauged, runs out his tongue and reaches in his pocket, begins removing bandages, or makes other business demonstrations, you may safely take his name and address, and listen to his story without making any immediate demands upon him.

By a careful study of physiognomy, a physician soon becomes an expert in detecting pain, distress, anxiety, or other emotions on his visitor's countenance. Where the mind is depicted upon the face, a cure is desired, and a fee will be forthcoming. A man of means has a startled, hunted look; he dreads illness; he can not afford it, and it is cheaper for him to consult and fee a physician to furnish him with a preventive, good counsel, or advice, and a simple prescription. A man of moderate means, or a poor man, carries a look of dumb despair on his face; he is wondering what those he is caring for will

do if he be taken down. He wants to be cured and he will share his savings or earnings with the doctor for the blessed relief to his worry and physical ailments.

Of course these are mere general illustrations of the ordinary run of patients who come haphazard into a doctor's office, or on the recommendation of some friend, or from seeing the doctor's name on his sign and fancying it, or deciding that it will be lucky because it has an even number of letters in it, or saw it over their left shoulder, or—but why enumerate? The phases of human nature, while not infinite, are numerous and sufficiently marked with differences to enable the physician to catalogue them in separate categories, and in that way to be able to make a good guess as soon as the stranger enters his office.

If, however, the general results show too large a percentage of callers or correspondents declining to accept service, the outcome of the consultant physician's usefulness may be easily conjectured whether he practices on his own account or for others. There is something wrong somewhere, something out of gear in his business manipulation, personal manner, tact, judgment, or other indispensable quality in his methods, which, if it can not be remedied, he may as well fold his tent and emigrate to other pastures and begin anew on a new page with the old one turned down. It is useless to

continue the cultivation of a field that is absolutely sterile, and no material at hand to give it fertility.

But now, let it be assumed that some prospective patients are willing to be accepted as actual ones, and that the next step is the consultation, the preliminary to a diagnosis and to the administering of remedies, or of an operation. Here again there is much nicety to be observed; it is the critical few moments that make or mar the most brilliant prospects.

As has been observed, a sick man's intellect or mind is more or less affected by his malady. Seldom is there found a healthy mind in an unhealthy body. Some men will swear at a slight twinge of the rheumatism; others are in a prayerful mood over a colic; many are frightened at a backache; not a few apprehend paresis when they have a headache, while others are hysterical over nothing. The doctor must study these and all varieties of patients, and aim to control their mentalities, as well as manage their physical ailments, hold both with a tight rein, so to speak. Many patients want to suggest remedies of their own fancy. They have been reading the newspapers, or have seen the pictures of those who have been snatched from the jaws of death by some patent nostrum, and whose epitaphs would make more interesting reading than their recommendations, or else some friend has been cured by taking a certain drug. Such patients are diffi-

cult to manage. They are in earnest and are not "beats." They are "rattled," or foolish.

Doctor Silva, a physician educated in Switzerland, but who located in the west and was well known and liked—he has long since gone to his account—always humored that kind of patients, but he added a trifle of ipecac or other harmless emetic, which brought the patient back ready to have more confidence in the doctor's treatment and less in his own. Lord Bacon gives some very good advice on this point.

"Physicians are some of them so pleasing and conformable to the humors of the patient, as they press not the true cure of the disease; and some are so regular in proceeding according to art for the disease, as they respect not sufficiently the condition of the patient."

This is hewing quite close to some lines every physician will recognize, but the wise man continues and gives the very gist and essence of the matter to be seriously pondered and appropriated by every one. He says further:

"Take one of a middle temper; or, if it may not be found in one man, combine two of either sort; and forget not to call as well the best acquainted with your body, as the best reputed for his faculty."

Celsus de Med. i. 1. says: "Nature should be cherished, and yet taught masteries."

There are few men whose health is not a matter of interest, perhaps anxiety to his friends. Some

one misses a familiar face, and after inquiry hears that illness is the cause. A trifling cold, an indigestion, and "I thought I would stay in the house a few days." Calling in or visiting a physician has not been thought of. "Now, you come along with me to consult Doctor Smith," or "I will bring Doctor Jones up to look at you." This is not officiousness; it is pure friendliness, brotherly love, perhaps anxiety for another's welfare; it is a species of altruism. "The friend" sits by during the consultation and smiles approval as the patient unbosoms his woes, correcting him when he goes astray, often adding symptoms that have been overlooked, even putting in his oar when the doctor comments upon the case. Now, what is a physician to do under such circumstances? Nothing but submit, for extensive experience teaches that if the patient wishes the presence of a friend, it is better to take him into the consultation. Cases are common where a patient will hold his friend's hand tightly during a consultation, as if to draw encouragement, which is generally the real reason for desiring a friend near at hand. Some case-takers object to this presence of outsiders, but the advantages are apparent. If the doctor is diplomatic he will make the consultation an object lesson to the friends of the patient and thus widen his sphere of influence. Of course there are cases where the presence of friends is a hindrance, particularly in sexual diseases and those of an especially private nature, operations, etc.. but

in general cases it is beneficial to have some one to whom to appeal, some one in good health and with sound judgment, for, as we have said, a sick man's mind is attuned to his physical infirmities.

CHAPTER IX

THE CONSULTATION.

Festina Lente.

IT is assumed that all the prerequisites have been complied with so far as a consultation is concerned, and that both physician and prospective patient have agreed to talk over matters preliminary to undertaking a treatment—no doctor can undertake a "cure" any more than a lawyer can undertake to win his client's lawsuit or a clergyman to save a soul that appeals to him. The physician, like the lawyer and clergyman, is the best judge of the proper course to pursue to reach a recovery, a favorable verdict, or salvation, and he must be the only judge. The saying, "There is wisdom in a multitude of counselors," was spoken of cases where there could be unanimity of opinion. Where there is unanimity of disagreement, radical divergences, as is the case to-day, alas, that it should be confessed! a multitude of counselors in any professional matter means utter failure. The questions of life and death hanging upon a single remedy, a course of treatment, the stroke of a knife,

vast property interests, the salvation of the soul, are too overwhelmingly serious to be sacrificed, or even trifled with, by appeal to the vox populi; yet it must be admitted that there are cases where a consultation is necessary and beneficial, but that is a different matter, as will be shown hereafter.

In general, therefore, the physician is the sole arbiter in a given case, and when he is put in possession of all the facts and details of it, he, and he alone, must decide what course to pursue, what treatment to adopt, and in doing that the patient must be made to understand clearly that he must respond to the treatment. Many physicians are at their wits' end to find a reason for the apparent failure of a certain treatment adopted in pursuance of a correct diagnosis. But the reason is not far to seek; it will be found in the resistance of the patient. He imagines he is fighting disease when he is really fighting the treatment of that disease. This point is certainly well taken, for it is based upon the experience of a multitude of medical men of renown and genius. To persuade a patient to surrender to the treatment while his intelligence is resisting the disease is where the ability and diplomacy of every physician shines with as much brilliancy as in any other step in his treatment. The treatment is and must be based upon fighting the disease, and the mind of the patient must go along with it pari passu to make the treatment effective, otherwise the malady finds

an ally in the sufferer, and both together oppose the intent and aim of the physician—two against one, in fact.

In consulting as to whether the patient's case will or will not be accepted by the physician, the latter is in the same position as the lawyer who notes down the "statement of facts" given him by his client, and decides whether he will go on or not. Here is where ability is required, judgment, tact, lucidity and cold stoicism, without a trace of anxiety or other sentiment. To know just what to say, a word here and there, a suggestive question, requires diplomatic skill, and is of as much importance as TO KNOW WHAT NOT TO SAY. Silence is always golden. Few physicians are in a position to make the break the celebrated surgeon Abernethy once made.

Quoth a lady patient who was telling him her ailments:

"Oh, doctor, it hurts me so whenever I lift my arm above my head!"

"Then why the devil do you do it, madam?" was the quick retort.

This recalls an incident that happened a lawyer friend, who relates it as a good joke on himself. It can do no harm to tell it in a book written exclusively for the medical profession; on the contrary, it contains a moral which will be of service.

A strange woman once dropped into the lawyer's

office to consult him about a divorce. She was glib of tongue, and her sharp nose, thin lips and "hatchet-faced" style of physiognomy proclaimed her not only a virago, but an extremely unpleasant one for a companion. The truth is, the lawyer was afraid to ask her for an advance consultation fee lest she should "jump on me," as he expressed it, so he let her go on about the wickedness of her husband.

"Of course you have sufficient grounds for a divorce?" suggested the lawyer blandly.

"Grounds! I don't need any grounds," burst forth the volcanic prospective client, "he won't do anything for me.

"Ah, I see, a case of failure to provide; your husband refuses to support you properly."

"Support me?" snapped the woman. "He gets me more than I want. I tell you he doesn't do anything for me. Can't you understand?"

But the lawyer scratched his head in vain for elucidation, and looked puzzled. Whereupon the woman, hitching her chair up close, said, in what she intended to be a whisper, but which could be heard across the street:

"You're a married man, ain't you?" The lawyer nodded, although he was a bachelor.

"Well, when we retire for the night my husband turns his back on me and goes to sleep. He won't do anything."

The lawyer looked her all over, took in her

repulsive characteristics, noticed her lanky, bony framework and her general awry appearance, then blurted out:

"I don't blame him, madam; I wouldn't if I were in his place."

Up jumped the woman, who rushed for the door exclaiming: "You're a h—l of a lawyer!"

How often has a doctor heard substantially the same expression, "You're a h—l of a doctor," after some "break"? Festina Lente—make haste slowly and surely, for not every patient wants his physician to be a "hail fellow well met."

It is proper for old family doctors to be genial with every member of the household, from the man of the house all along the line, including the baby down to the cat, and have some joke ready; but in the modern city consultation room it is destructive of that calm, philosophical atmosphere that should prevail, and which is productive of fixed impressions.

It is not, however, necessary to tinge a doctor's office with the doleful air of an undertaker's establishment, or that of a "funeral director," as he is now called, by assuming an appearance of overgravity. Some people enter a doctor's consultation room as if they were going to the gallows, wrong impressions they have received elsewhere giving them the sensation of approaching an executioner of some kind. To remove both impressions all that is necessary for a doctor to do is to show a

human interest in his patient's statement of the case, and betray an appreciation of his condition. Of course, there is dignity to be maintained, but it is the dignity of a man who knows his own powers without manifesting his self-consciousness to his visitor.

It is sometimes difficult for a physician to conceal his sympathy by a stoical demeanor, and he betrays his anxiety by his sympathetic expressions, thereby creating the suspicion in his patient's mind that the case is graver than it really is, and that he fears unsatisfactory results; perhaps the patient interprets his anxiety to the fear that he will not be intrusted with the treatment of the case under consultation.

It is well enough to take some pains to put a visitor at his ease—make him feel at ease, as the expression is. This is diplomatic and always good policy, but we are not orientals, and, therefore, do not offer any visitor our whole house and belongings as his own to do with as he pleases. I' faith, if a modern man—that is, an American—were to say to a visitor, as it is customary among the orientals: "This is your house with all it contains, I am your slave and you are the master," he would be immediately taken at his word and find himself dispossessed and out in the street before he could have time to explain that the language was purely metaphorical.

The physician is the master mind, and that is

what a sick man needs. When he meets one he is content and settles down submissively. He is the applicant for a favor, he is seeking for relief. Now, let the physician, the master of the house, the sole arbiter of the fate of his patient, quietly demand the reason for the invasion of his premises. It is a matter of astonishment to him; he has not the least suspicion of his visitor's purpose. "You called to consult me?" A timid answer "Y-e-s" or a bold "Of course," and "Very well; be seated," and you fix him where the light will shine full upon his face so that you can study its expression. You do not have to ask him what the trouble is, your waiting silence is a notice to him to begin his narrative.

Let him finish; do not throw him off his line of thought; a suggestion, a look of inquiry, a raising of the eyebrows; every physician will be guided by circumstances. By adroit management it will be possible to get at all the valuable, essential pointers, as the lawyers say, "the gist of the matter." It is fair to impress the patient with the fact that you are a busy man and that your time is valuable. There is a reception room full of waiting patients, a furtive glance at your watch, or at the clock, or, "excuse me a moment" as you examine your calling list. There are various things that will occur to a practitioner to do, which will impress upon his visitor the necessity of brevity without hurrying him. Remember that every man is

his own world, a universe, to himself, and that the needs, necessities and desires of others are nothing to him, and that a sick man is supremely selfish, not in the odious sense of the word "selfish," but quite naturally so from personal anxiety.

It is a patent fact that the physician is like the judge listening to the testimony of a party in a given case, and a party who aims to secure a favorable decree. He must be led away from irrelevant matter and gently but firmly guided into the merits of his case. Now, that decree or decision is not to be lightly given in an offhand manner. The doctor knows nothing about his patient's case, even if he has learned all about it from extraneous sources; he is bound by presumption, and not by gossip or hearsay evidence; he must have the conditions first hand, gather impressions from an actual witness of the act and ponder and weigh the evidence.

Many patients have read "Every Man His Own Doctor," the wonderful cures advertised in the newspapers and magazines, have devoured the numberless symptoms of this, that and the other diseases cured by this, that and the other mixture of logwood and water loudly praised in the almanacs and circulars pushed under their door or thrust upon them at every street corner, sometimes scattered as thick as snowflakes from bandwagons —a thing permitted quacks by the old ethical rules—or else he has imbibed a mixture of clair-

voyance, hypnotism, spiritualism, Christian science, faith cure, mesmerism, mind reading and heaven only knows what other cemetery-filling agencies, and he comes prepared to find a physician who will fall in with one or the other of these soul and body destroying fads. By asking him what he has learned of value to himself personally from spirit mediums and clairvoyants he will unwittingly rhapsodize over his own ailments, and thus the physician will learn his visitor's physical conditions.

A patient once asked a famous Cincinnati specialist if he could tell the trouble without looking at him. "Do you take me for a damned fool?" blurted out the doctor. "Well, I didn't know—I thought I would ask you," quietly replied the patient. It is not necessary to say that he took treatment.

This is as good as what happened a San Francisco doctor. A patient had been going the rounds of bargain hunting, and the doctor knew it, so he was a trifle impatient with his visitor. "Why do you come to me," he asked. "Why didn't you take treatment from Dr. M——?" "Because he told me to go to the devil," was the reply. "Told you to go to the devil, eh?" said the doctor. "Well, what did you do then?" "Why, I came to you," was the unsmiling answer. Of course after that there was nothing the San Francisco doctor could do but give

the patient treatment, and what was remarkable, his bill was promptly paid.

A friend tells me a story of the wonderful tact of Dr. S. of Cleveland. A young friend of his who was a sufferer from agonizing attacks of neuralgia, had been studying up anatomy, and reached an opinion that he could be easily cured if his physician would only follow his lay advice. So one fine morning he called and made this suggestion to the doctor:

"Doctor, I have discovered that my neuralgia is a purely nervous complaint. Now, why not cut certain nerves in my neck, and so make it impossible to feel the sensation of pain?"

"A very good idea; it will certainly cure you. I will do what you say now, but excuse me a few minutes until I complete a job I am at; I won't be long, and in the meantime amuse yourself with these beautiful pictures," and he handed him an atlas of illustrated cases of facial paralysis. When the doctor returned, his patient was smoking a cigar. "I don't think I am suffering so much pain to-day, doctor, and if you will give me a sedative it will be enough." He never had his nerves severed, and he never gave the doctor any reason for not having the operation performed. The doctor, himself, never alluded to the matter.

CHAPTER X

SOME ESSENTIAL "DON'TS"

"When I look around and see the intricate network of Don'ts, out of the meshes of which all men appear to be engaged in a moral struggle to free themselves, I am consumed by an overwhelming desire to enact the role of Alexander, who settled the Gordian Knot problem by one vigorous blow of a sharp sword."—Yearnings of a Twentieth Century Philosopher.

WE are living in an age of fretting contrarieties, when everybody seems to be attempting to control or "boss" everybody else, without ever thinking that to be a success at it, he must first learn to be his own master. From the cradle to the grave every member of the human family has constructed for his individual occupation, a house of glass, at which every other member of the same family is busily engaged in throwing stones, a strange perversion and misapplication of the proverb "Those who live in glass houses should not throw stones." But so it is. Whether it is habit or custom, a good thing or a foolish one, it is part of our modern social

system. "Thou shalt not" has been snatched from the lips of the Creator of the universe, transformed into the equivalent of "Thou shalt," or, to express the combination in modern language: "Don't."

From the mortuary cerements of entombed morality come in doleful accents "Thou must do as the monk says, not what he does," and the descendents of the Roman augurs laugh in their hoods at the credulity of the populace, and the modern Egyptian soothsayer dances with joy at the dollars and dimes pouring into his barrel from the pockets of the multitude prostrate before his gigantic Memnon, listening to his siren voice as the rays of the rising sun warm up his inorganic mass, fondly imagining it to be the voice of the Deity. The scheme is all part and parcel of that now ungovernable desire to make everybody abandon his own particular line of conduct to adopt that of somebody else.

That all must do as others say
Has got to be the rule:
Whoso sticks to his own conceit
Is set down for a fool.

From the first spoonful of pap to the last one of tonic the children of men are pursued by the domineering will of outsiders. The man with the armor-plate constitution treats the other man whose skin a puff ball would perforate as a target for his solid shot, and expects soft bread pills in re-

turn; the ostrich stuffs tin cans and tenpenny nails into the delicate, tender crops of humming birds, and many are smashing gnats with sledge hammers. Whatever man eats, drinks, wears, or thinks, is dished up to him by somebody else, and his course of life is laid out for him through shifting, bobbing buoys set to delude him by unconscionable wreckers intent upon plunder. 'Tis the blind leading the blind into the inevitable ditch.

Can the thin prescribe a diet for the obese, or the contrary? Can the shivering, cold-blooded, dictate the quantity or quality of under garments for him of a higher temperature? I' faith, no; but is there a single awry-constructed specimen of the genus homo, who does not aim to pull the others down to his own lip warping, green persimmons?

Shall we, perforce, submit always to the outside dictation that is dragging the human race into a pit of incurable degeneracy? Shall we rebel now, or wait until too late, when upon our tomb shall be carved this epitaph:

Here lies a man who tried to do
  As everybody said.
That he succeeded is quite plain,
  Since now he lies here dead.
His life was one continual round
  Of feasting on pure thought;
He gorged himself, his friends all say,
  That's why he here was brought.

Now, there are don'ts and don'ts, some that are beneficial, proper and useful. In putting the reader in possession of these don'ts, let him kindly consider that the intention is to put him in possession of that worldly wisdom which leads to success. It is not intended that our catalogue of don'ts shall be accepted as dogmatic, for we constantly bear in mind what has been written above, we merely urge them as points that ought to be observed if success be desirable. It is not intended to dictate, only suggest. Moreover, they are based upon long experience. They are what the monk says and also what he does. Do not permit any jolly, fat friar to put you off the track with half his mental loaf—the worser half.

Don't commence to write name or facts immediately the patient enters the room. To put down their names looks to some people as if you thought they had actually agreed to take your treatment. The first step is to get the confidence of your visitor and then the writing necessary will not be looked upon unfavorably.

Doctor Himes was a physician skilled in the art of phonography, and whenever consulted he invariably whipped out his notebook and "took down" his visitor's statement verbatim. This required him to keep his head down close to the book, for he was near sighted. Sometimes the patient would stop, and then the doctor, without raising

his head, would say: "Go on, go on, I can write as fast as you can talk."

This seldom failed to confuse a new visitor, who fancied that he was on the witness stand and an official reporter taking down his testimony to be used against him, and the doctor lost many good patients by this habit, which, however laudable it might be to refresh his memory, was contrary to good policy, for the majority of people do not like to have their words written down before their own eyes. It means something that will bind them in the hereafter, and they want to feel free, especially in a doctor's room. Take notes, of course; it is always better in important cases; but that, as has been said, should come after confidence has been gained.

The first examination, however, should be thorough, and it is well to unmask every defect and make a careful note of it for subsequent guidance.

Don't agree to cure all abnormal conditions for one fee. Leave room for other fees for entirely different conditions, which, of course, you detect on the first examination, but which you do not disclose to the patient then, because, as you afterwards announce, the main trouble was sufficient to have a patient think about. Moreover, you knew to a certainty that the additional trouble could be cured when the main malady was disposed of.

There are those who feign an insignificant complaint, and drag in real complaints of graver im-

port, the object being to be cured of the graver complaint for the fee fixed for the lesser one. Some patients are fond of being thought very sick when there is nothing much the matter with them, and they are surprised at a fee fixed for a magnified serious case. Others expect to conceal their real troubles from the scientific eye of the physician. To all these the practitioner must say, of course mentally, "No, you don't."

Don't agree to treat any condition except that specified in your original consultation. A physician's business is wholesale only as to the number of his patients; as to treatments, it is necessarily retail. If you are persuaded to reach ahead, what is to become of your extra fees when new conditions arise? Your patient always has his wits about him and so must you. He wants a health guardian, and as soon as he gains your confidence, you are it. This is exactly the reverse of the way things should be. You want him to have confidence in you; having confidence in him is quite another matter. He is a stranger to you and he knows that you feel a slight distrust of him, and as you are a stranger to him, of course he feels a little distrust of you. But, he has more to gain than you, and if he works quicker than you he will gain your confidence but withhold his in you until you have been tested. That sort of a condition is unnatural; it should be the reverse. You know what you can do and he does not; wherefore, gradually enlighten him and thus

put him where he belongs, on the right side of the confidence question.

A western representative of a Chicago medical institution was accustomed to give a contract to make the patient perfectly well in every respect. Such patients expected restoration to a state of impregnable health, likewise free board and treatment whenever they chose to visit the city. No one was able to retake his cases. Remember the "Cure or kill" contract already mentioned as a good illustration of this way of doing business.

Don't take life-time patients with paid-up lump fees. It is worse than an annual railroad pass used by a hundred different people before it expires. It is not commercial sense, moreover, you are saddled with an Old Man of the Mountain, and can never get rid of your load. He feels that he owns you and breaks in on your rest, your privacy and your business at every stomach ache, or brings a friend along to show off "My doctor." You might as well adopt the oriental plan.

Among the orientals, China particularly, it is customary for a patient to pay his doctor a certain stipulated fee as long as he is in a state of good health, but as soon as he falls sick the fee stops. This appears to be a very good custom, and works quite well among the Chinese, and is better than guaranteeing a cure, but from what has been said heretofore the reader will comprehend that should such a custom prevail in this country, the patients

of every doctor would become chronic invalids to avoid paying any fees at all. It might be tried here, if to the contract were added a clause requiring the patient to follow strictly the directions of the doctor in regard to diet, exercise, etc.

Another "Don't" is the common "contingency" case. The doctor gets so much if he cures, nothing if he does not, or if he fail to cure within a certain fixed time. If there is any advice that ever originated with the Father of Deceivers, this is one of them. It is so utterly, absurdly and stupidly threadbare that it seems impossible to find any man at this period in the world's progress that will unblushingly suggest such a thing, or that there is any doctor who thinks so little of his profession to listen for a moment to such a proposition. But, alas, that it should be said, it is quite common. Lawyers meet with clients like these patients, who hunt around for somebody to take their cases on a contingency, and it is a pleasure to know that a lawyer can cure this sort of scheme by keeping the whole of the proceeds recovered, in addition to his "contingency," by adding "constructive fees." An Englishman once employed a lawyer on that basis, and when the bill was rendered he was reduced to a condition of insanity by such items as these: "To waking up at night and thinking about your case, two and sixpence; to saying a good word to your dogs, fourpence; to listening to your version of the story of Chinese Gordon, one pound," and so

on. But a physician has no recourse of any kind, and the only thing for him to do is to keep out—Don't.

Sometimes one of a certain large and influential (?) class of patients comes to your office. He is afflicted with some sort of chronic ailment, more or less complicated and difficult to cure. He has been the rounds, knows all about doctors, remedies, and treatments, and he is very patronizing in his demeanor, he is already doing you a service, don't you know? by permitting you to examine his case, it is so very extraordinary. Well, after you have made an examination and informed him that in your opinion his case is curable, and that you have no doubt you can cure him if he will place himself under your treatment, and give you his faithful co-operation, he will come back at you after this fashion:

"Doctor, I know five or six cases of personal friends, afflicted just the same as I am. They are waiting to see if I get cured, and if you will take my case gratis (or for a small fee, which, if not exacted in advance, means the same thing), after you have cured me I will get you all these cases of my friends, who will pay liberally," etc., etc.

You may make up your mind then and there, that there are a few liars left, for you will have a shining specimen before you, and diplomacy will have to be used in dealing with him at all.

Experience has demonstrated that in at least

ninety-nine per cent of these cases, you are confronted by one who is both a liar and a dead beat, and it is a puzzling question with the most of us how best to dispose of him without frankly expressing our opinion of him. To do so may make of him an enemy, whose slanderous tongue might possibly do you harm with those not well informed as to his real character; for, unfortunately, some of these people have apparently respectable reputations, and generally an influence for evil rather than for good. Remember that falsehood hath a goodly outside.

The author's plan of dealing with such cases is as follows: I keep in mind the fact that any business done with him must be on a spot cash basis; inform him that it is my custom to exact cash payment in advance in all cases of such a nature as his; that while I give liberal reductions to the clergy, indigent students, working women, and the worthy poor, I do not give commissions either in advance or on prospective patients that may never materialize. I then "call his bluff," and completely unhorse him by proposing to give him a discount of twenty-five per cent for advance payment, with the stipulation that when he sends these other "phantom" cases, "afflicted just the same as himself," I will give him a commission of twenty-five per cent on the fee each of them pays, so that he will have the money back paid me for his own case when only three others have been gotten in line,

and as there is no limit in the number of cases he may send and get his commission on, he stands to make a HANDSOME PROFIT, if his influence is as potent as he represents it to be. This usually results in landing him for a fair cash fee, and making him a friendly patron, who cannot fail to respect the superior ability and diplomacy which defeated his unworthy attempt to get "something for nothing."

Don't be guilty of the common mistake of telling a patient to take the medicine you prescribe, but that if it does not do the work to return and you will give him another remedy, for he will think you are holding the best back, or that you do not know your business, and are trying experiments on him. Moreover, this is equivalent to taking the patient into your confidence, which is, as has been said, the very reverse of the relations that should exist between physician and patient—you want him to have confidence in you, there is no ground or reason why you should place your confidence in him, as well hand him a druggist's "dispensatory" and tell him to pick out what he fancies and let you know the result.

Don't let your conversation with your patient lapse into a channel that may have a baneful bearing. You have a visitor before you whom you want for a patient, and who wants to be your patient. Why otherwise should he have taken the trouble to call upon you? There is reciprocity already in

your relations, and it must be maintained if you expect anything to come of them. Courtesy is demanded, not sycophancy; dignity, but not pomposity. Be natural, your own self. Every man has an individuality different from other men, and that individuality should be made apparent, it is a distinguishing mark, as easy to be read as a label on merchandise—it is really a birth mark. Men know you by that individuality as you know them by theirs. Don't try to be somebody else; that is to be "shoddy." While on this point, let the physician be advised not to pretend that he wants the case for the sake of the fee. The fee may be needed, but it is not necessary to let that appear. It is a private matter, and just now you are being consulted by a visitor whose own needs are paramount, and if you keep pushing your personal wants to the front, he will finish by thinking that you are a collector of funds for indigent persons, instead of a physician holding yourself out as ready to cure physical ailments. But it is not necessary to assume a take-it-or-leave-it air, for then he will imagine you do not care for his troubles, which is just what you do not want him to imagine, lest his confidence be nipped in the bud.

Don't importune your visitor with superfluous questions. Be suave, but stick to the gist of the matter and gently guide your visitor in the same direction. There are usually enough important facts to furnish a good theme for conversation, matter for

a guarded, sensible discussion. A visitor can tell when you are interested and when your interest flags. The "grin-and-bear-it," idea is antiquated. Nor is it necessary to smile and look pleasant as if you were having your photograph taken. You and your patient are confronted by a cold blooded business proposition. After all the preliminaries have been arranged, then a little sentiment may very properly be let in.

Don't advise before the time for advice has come. It is a habit with prospective patients to say: "I should have done so and so, eh, doctor?" or "What should I have done in such and such a case, doctor?" It is much easier, likewise more profitable to observe: "Not being fully acquainted with the case, of course I am unable to tell you," than to say: "Well, you should not have done that," or, "You should have done so and so." The visitor is not your patient yet, and here you are already treating him. Most sharp visitors will "catch on," and depart with "I will call again, doctor, to-morrow." But they never return, they don't have to, they have been already treated, and know what to do without any further advice.

It used to be the custom among clergymen to take their sinners to the very edge of the brimstone pit, and threaten to throw them over if they did not repent, and it is still customary with some of them. So it was and is with some physicians: To take a sensitive patient, whose nerves are already on edge,

and frighten him into fits by relating the horrible consequences liable to happen if he does not take medical treatment immediately. Nowadays, when a clergyman preaches too much hell-fire and brimstone, his congregation thins out to bare walls, and the physician who employs a yellow newspaper scare head manner of attracting patients, will soon discover that his method is a case-getting destroyer.

There is nothing handsomer than an exhibit of surgical instruments—that is to the general public— in a shop show window, or in a fair exhibit, but in a doctor's office they have a personal meaning, an indefinable feeling of dread fills a visitor at the paraphernalia of cutting and carving implements, and he imagines the doctor, who is so close to him that he can not secure protection before it is too late, may whip out a bolo, a Chinese whanger, a Cuban machete, or other dreadful knife from his sleeve and perform some sort of an operation on him then and there. They are nice things to look at under other circumstances. To make a pretentious display of them in a consulting room, is as bad as a grinning skull, or a rattling skeleton. What drives people to a doctor's office is substantially the same sentiment that drives them into religion—the fear of death, and they do not want to see deadly implements or suggestions all around them, they much prefer pleasant things, just as some patients prefer nice, sugar coated pills, and otherwise disguised remedies, to the nauseat-

ing bitterness of the real, unadorned drug. A fine array of books is always to be admired, they give an air of wisdom to the surroundings, and enhance confidence.

A friend tells me of an esteemed physician he once knew, a Doctor Hartwell. It was a perfect pleasure to consult with him, and his patients would quarrel with one another for precedence to get into his consultation room, and his success in attracting children was something positively phenomenal, they actually cried to be taken to him. And yet his method was very simple. In the summer time his consultation room was decorated with pictures, representing cool, shady groves, scenes in the frigid zone, refreshing fountains, fruits and flowers, with light, cool decorations; the doctor himself wore crash garments, and always looked as cool as a cucumber. In the winter time, however, all the decorations were changed to represent tropical scenes, lurid conflagrations, and even some scenes from Dante's Inferno. The furnishings were all warm tinted, and the doctor met his visitor accoutered in warm garments, a heavy overcoat or two, and a fur cap hanging comfortable on the wall. As for the children, he had small toys which he pulled out from drawers and boxes, and, when examining a small child, he would, as if by accident, open a nearby drawer, and expose something dear to childish hearts, a stick of candy, a doll, or other prized object, and then turn his head away so that

it would feel free to grab the prize, which it always did with a shout of triumph. It was a little trouble, but it was tactful, and he was the beau ideal of a doctor in his neighborhood.

Don't tell your patient that it is going to be a difficult job to cure him, and that it will require nerve on his part to pull through, or that, perhaps, you will have to resort to radical operative surgical measures. It is not necessary to forestall any particular treatment by any display, statement or intimation. A prospective patient is always willing to submit to the inevitable, and he expects you to adopt that treatment which will cure him if it requires vivisection, or skinning to do it. The inevitable is bad enough for him without rubbing it in.

Impress upon all who interview you that modern methods, particularly those in vogue with you, are of such a nature as to banish all the suffering and danger formerly incident to treatment.

It is the easiest thing in the world to put to flight all confidence and reliance upon your ability to cure without the element of torture, by letting escape you, reference to prospective use of the knife, or by assuming a brisk or so-called "surgical demeanor."

A heartless doctor, now in mind, was wont to tell his patients they were about to make a "cutting" acquaintance with him. Although a good surgeon, this man to-day is regarded as a brute, and the scope

of his practice is not nearly so great as his skill naturally warrants.

But in cases where operative measures must be taken, disarm fear by the positive assurance that the operation is a safe one and will be done under modern methods which eliminate practically all the danger, and lay especial stress on the fact that it is certain to result in a complete and permanent cure, which can be accomplished by no other means, and that the danger, if any, is in the neglect to have it performed early, or from the disease and not from the rational remedy.

If the patient has the prejudice against "the knife" so frequently met with, endeavor diplomatically to show him the extremely low mortality percentage, and impress upon him the impossibility of cure by other methods; and it might also be well to call his attention to the fact that it is only the ignorant, incompetent and unskilled quack and charlatan that inveighs against modern surgery, and that the brightest and best of the human race indorse, rely upon, and employ surgery in emergency.

Unmistakably, there are diseases and conditions that call for no other measures than those of advanced surgery. This great art is indispensable to the world, in war or peace, and for any doctor to rail at its practice is prima facie evidence that he is either a fool or a knave—unworthy of confidence in either case.

That the gravity of surgical procedure has been

diminished in large measure by the evolution of advanced methods and scientific adjuncts that safeguard the subject and reduce suffering to the minimum, is now pretty well understood by the masses.

A proper representation of the surgical means which you contemplate utilizing in a particular case, and a clear statement of the fact that there is no possible way of accomplishing the desired result without the agency of surgery, will appeal to the reason of common-sense people and contribute to your success in taking surgical cases, and to your surgical repute likewise.

Surgical display, calculated to impress patients that you would "rather cut than eat," or that it will be necessary to cut deep to cure them, is highly reprehensible.

The wise surgeon impresses the patient that his surgical skill is practically as devoid of harm as his therapeutic practice, and, at the same time, he does not under estimate the value of his services in either field.

It is folly to lose fees by undiplomatic manners or statements. You should make people understand that you master disease with advanced methods that rob old time surgery of its terrors and dangers.

Let people gather that at one time in your practice—or in the practice of your elders, if you are quite young in years—resort was necessarily had to the surgeon's knife, but that it is now as

much the duty of surgeons to take away pain and risk in surgery, as for the physician to reduce the fearfully large and debilitating doses of former medical practice.

A thousand and one things—a word, a look, a sign of uncertainty, etc.—will be quickly observed by a sensitive and nervous patient, and the case irretrievably lost before you are aware.

The complications that arise in every physician's practice, are so varied, that it is impossible to furnish other than general ideas upon the subject of case-taking. In what has been heretofore said upon the subject, the seamy side of human nature has been exposed in particular cases, upon the basis of the old saying: "The exception proves the rule," and the reader will understand that by being on his guard against human baseness, he will have no difficulty in separating the chaff from the wheat in the general mixture of prospective patients who drift into his office.

Far be it from the writer's intention to argue the total depravity of man; on the contrary, it is better and more conducive to right-mindedness, to assume that all men are good, and establishing that as his standard, he will soon find that he can easily detect those who do not come up to that standard. How easily a speck of dust in the eye is distinguishable from normal conditions! Moreover, "irregular" human nature, not to give it a worse name, is in

the minority, though it must be confessed it makes itself felt more than the great majority on the side of honor and decency, which is a characteristic of all minorities in every department of science, or branch of human action and occupation. It might be said in explanation of this peculiarity, that the under dog is always struggling to get on top. It is a matter of common knowledge in everyday human affairs, that the most worthless and the most vicious cause more trouble to any given community, than ten times their number of quiet, peaceably disposed, decent citizens. The records of our courts show a very small percentage of the criminal classes, yet the main expense of government is their attempted regulation, and the greater part of the monster machinery of our judicial system is devoted to their suppression, reformation and punishment. It costs as much to prosecute one vicious man for murder, as it costs to bring one hundred children into the world.

There is this to be added with reference to the medical etiquette to be observed in regard to case-taking where this class is concerned. In the majority of cases, outside of fortuitous, or accidental ones, the malady is brought on by radical viciousness, or by some willful violation of the laws of nature. Where this is found to be the reason, the physician, while he should be careful—as, indeed, he should in all cases that come into his hands—not to exhibit the characteristic of a merciless, or even severe

judge, it is not required, however, to display that tender, humane solicitude for his patient that he ought in other cases originating in ignorance. It is undoubtedly the duty of a physician properly and carefully to bind up the wounds of a man injured by a fellow man whom he attacked with murderous intent, or a burglar mained in his invasion of another's lawful domicile, as it is to medicate the bruises of a helpless woman who has been set upon by a brutal husband. Of that there is no question, the distinction is sympathetic, psychological, altruistic, and every right minded physician will understand that difference and permit it to sway him when it comes to a question of etiquette in the matter of case-taking.

CHAPTER XI

DEALINGS WITH THE GENTLER SEX.

"A perfect woman nobly planned,
To warn, to comfort, and command."
—William Wadsworth.

THE world doffs its hat to woman, whatever her station. Among the orientals she is too precious to be permitted to run at large, hence her beauty is shrouded, and she is immured in harems remote from the eyes of the vulgar. In more civilized nations she is separated from the admittedly coarser male sex, in churches, and assemblies, but in the most highly civilized communites, she walks a queen governed by nothing but her own will, which, though it may develop into mere caprices, is nevertheless, pardonable because the perpetrator is a woman.

Why this universal difference? It cannot be attributed to her weaker nature, for to say that would be to bring upon one a storm of invectives from the "strong minded." It cannot be her helplessness, for heaven knows that, among us, one woman is strong enough to incite a riot, and the strongest

and best armed man quails before a frail woman with only a flashing eye and a hat pin as weapons of defence. To say "pooh! pooh!" to a woman is to incur the odium of narrow mindedness, and to lay a hand upon her, whatever may be the provocation, is to incur the punishment of lynching at the hands of an indignant community.

Being, therefore, neither weak, helpless, nor defenceless, what is it in the essential nature of woman which always demands respect, polite attention and careful consideration? In attempting to make her nature clear, it is hoped that the reader will look deeper than the surface, read between the lines, as it were, and draw inspiration upon which to base wise judgment and thus successfully take a case, where, without that inspiration emanating from knowledge, so many utterly fail.

It is very strange that the greater the progress man has made toward higher civilization, and the further he has advanced in the knowledge of his own constitution, the greater the obscurity surrounds the relations between the sexes. It would seem more reasonable for progress in human knowledge, for all of its branches, to advance pari passu, and not some of it forward and some backward. In the arts and sciences, government, and humanity, great strides have been made in the direction of perfection, and though women have been lifted out of a condition of mere instruments of reproduction, and placed beside man as his helpmate, com-

panion, and comrade in whatever pertains to the incidents of life and the enjoyment of existence; although she is now regarded as man's created equal, she is still invested with an imaginary weakness, which makes her the special object of man's care and solicitude. And this, notwithstanding that every day experience demonstrates her ability to withstand greater endurance, and her possession of as great, if not greater fortitude than man, under the most trying and painful circumstances.

What is the strength of man before the power of woman? "Spare the women and maids," was always the standing order in ancient campaigns of desolation, and, "Spare the women and maids," is the shibboleth in modern bitter sanguinary battles. Wherefore that order, that punctiliously obeyed command by the depraved ruffian as well as by the refined, sympathetic humanitarian? Was, and is it pity for their tender weakness? That can not be, for the influence that will calm the rage of battle, sway the lines of contending hosts, suspend the drooping glave and quench the destroying torch, comes not from weakness, but from a strength and power before which all men bow and become as plastic clay in the hands of the potter. Every man, at some period or other in his career, fancies that man is the dominating power in the world, but he does not progress very far along in years and experience before he discovers that men are entirely under the sway of women. Behind every

great man, nerving the arm of every hero, the inspiration to martyrdom, the object of decimating wars for dominion, the motive power about thrones and in legislative assemblies, holding the pen for every executive, the object and the aim of chivalrous knighthood, is woman. There is a good and substantial reason for this—woman is more necessary to man than man is to woman. This is not intimating that they are unnecessary the one to the other, for the law so declares, and all the regulations of the relations between them are based upon the theory of equality, but, on account of the nature of woman, which is essentially passive, she is enabled to appreciate her own attributes to their fullest extent, without any elucidation on the part of man, whereas man is nothing without the woman.

There was a time, according to tradition, when one man lived upon the earth alone. Though lord of all he found himself excluded from all participation in the ever shifting scenes around him, except as a mere onlooker. The twinkling stars, the shining moon, the zephyr's breath, and the golden sun that warmed his soul, were all for him, but were not of him. He stood upon the sands of the rolling sea, and the waves came to caress his feet, or, with sullen roar, mid lightning flash and thunder roll, lifted high their giant, foamy crested billows as if to overtop and swallow him, but still submissive, broke in soft and snowy surge at his feet. The beasts that tore one another's throats in frenzied

hunger or in native rage, forgot their savagery at his soothing touch. He saw the lioness fawn over her whelps, and the infant flocks and herds bound o'er the fields in the joy of their new born life. The birds, secure in their leafy homes, heard choicest music from their happy mates' deep throats, or to their young brought richest food.

Beneath the mantled stillness of the night, he heard all nature's joyful chorus borne to his ears upon the gentle breeze that whispered soft, caressing words to trembling leaves which shimmered in the starry night. All this was for his joy and pleasure, and to delight him as his years were passing by. He felt that this was so, for in his soul there was a power superior to all, and with which none of it could ever mingle or combine. Yet felt he also, that while all things around him fitted in as counter parts, and moved each within its sphere in most harmonious balance and in complete accord, he, of all, was but the half of what he should have been. He knew his imperfection through his own perception, but he knew not how it might be cured. He had no visions thronging in his brain, nor dreams to rouse his curiosity, for there was none and never had been one to tell him. The murmuring brook, the lowing kine, the voiceless birds, and the sighing breeze, all strove to tell him what was uncreate in his breast, but their language was as yet unguessed by him.

At last one morn, awaking from a dreamless sleep, and stretching out his arms like one who throws off slumber's chains, his arm encountered what at first he thought to be some careless member of his flock, but yet so different, that rousing up and half reclining on an elbow, he looked down in mild amaze upon his exact counterpart, his second half, but still his opposite. And so he lay and watched her while she slept, and while he watched, not daring to do more than look lest she should disappear, the curtains from before her eyes were lifted up, and in their depths he saw the blue empyrean in such perfect image, that up he looked to see if by perchance the sky had fallen down. Then down again he turned his gaze to see a soft smile wreathing all her dimpled face.

"I am thy wife and helpmate," she said. "Without me thou canst never know why all these objects around about thee, thou hast so oft surveyed, have been created. Long hast thou wondered, and within thy heart hast asked why thou wert, apart from all the rest, the only one who missed perfection's boon. We are to be the founders of a mighty race. From us will spring a myriad host to circle all the earth, and be the peopling of the twinkling stars thou seest above thee in the blue empyrean. A race whose future joys and sorrows are concentrate within thy breast, for in me is the essence and the energy of them all."

Thus spake the first woman to the first man, and

it was she who understood the magnitude of her mission, and conveyed the knowledge of it to the myriads of her sex. It was she, as the type of all, who taught the incomplete man the part he was to play on earth, and it is through her same innate, broad comprehension of her power, that woman has, and will through all the ages, impress upon the soul of man the true sense and meaning of the mysteries which environ their relations. She stands in the center of a vast amphitheater, through which flit the definite shadows of the past, and those of an illimitable future, but all bright and substantial to her mind. She apprehends the stupendous results of past experience that have, by permutations in the ancestral elembic, become concentrated in her soul, at a point whence radiate the same ideals of futurity that filled the soul of the first woman.

This capacity of the woman to understand and appreciate her own nature and attributes unassisted by man, is the key to the solution of the feminine disposition. Her absorption is the contemplation of her own perfections, and her self-satisfaction in realizing her own ideals is not abnormal or remarkable, but rather appropriate, and a pardonable vanity, if such a natural characteristic may be considered as a fault, inasmuch as it is her safeguard against a parallel active disposition in man, enabling her, as it does, to exercise control and dominion over him. The man, expecting to find a yielding, pliable spirit, finds himself in the presence

of an impregnable fortress, which, however strenuously he may besiege, compels him ultimately to surrender unconditionally regardless of consequences which are fatal to him unless he prove to be a welcome affinity. Better for him were he born blind and senseless if he prove inadequate to meet vital passive force upon an active equality.

Herein lies the proximate cause of unhappy marriages, the occasion for boldly declaring that marriage is a failure—the lack of physical affinity between the man and the woman. The ideals of the woman are higher and broader than those of the man, who is too often inspired by the mere passion of an appetite, which, gratified, leaves him cloyed as after too hearty a meal and an overloaded stomach. Not so the woman, she continues to aspire toward the object of her nature, until, finding that she is tied to one who is either unable or unwilling to assist her in attaining her supreme desires, falls into despair and becomes bitter, revengeful and Satanic, or seeks elsewhere for an ideal.

If all physicians would carefully study this phase of a woman's character, he might be prepared to manage the case with greater success, for it must be confessed, woman cannot be measured upon the same standard as man. Her maladies draw her away from aspirations, and to her a cure means being again set upon the right road toward their realization. The physician is her adviser and counselor; he must look deeper than her mere

physique, and penetrate her psychological nature, seizing upon that as the bane which frets and worries her into melancholia, distress, and finally into physical ailments. It does not matter who the woman is, whatever her station, whether she be handsome or ill favored, rich or poor, she possesses the identical aspirations, the same hopes, as says Tolstoi:

"The woman who lives in a miserable hut, and the czarina who sits on a throne and wears a crown, have the same destiny."

Like all the passive elements of creation, woman is a law unto herself, not bound by organic law, statutes, or municipal rules and regulations. Whenever any of them run counter to her preconceived opinions or ideas, she calmly sets them aside, ignores them, and follows her own instinctive desires. When it comes to her physician, however, she bows before him as a savior, one whom she fancies may redeem her and restore her to her ideal pedestal. Upon him she relies with all the clinging confidence of her passive nature, and she feels that her hope is in him.

True, many women are afflicted with uncomfortable idiosyncrasies, whims, and caprices, and there are some who engender unconquerable aversion, but let the physician look upon her in the light of a mental sufferer, rather than exclusively a physical receptacle for drugs, and extend to her a ray of hope—it is not much, but to her it is soul satisfy-

ing—and he will be surprised at the quick response her nature will give to his treatment.

There is another point of view from which to regard women: they are the foundations of a home, the basis of a family, and even when that hope is gone, they look back to what might have been, and take pleasure in the thought that by some inevitable combination of circumstances they were prevented from attaining that destiny. Then they look around them for other objects upon which to devote their lives, and every woman finds something or some one upon whom to exercise her yearnings. Here is where the physician may become her counselor and guide, the director of her small schemes looking toward her own amelioration and to that of others.

Even the erring has some hopes, aspirations, and devotion to some one thing as well as the pure minded and the virtuous. Her nature has been warped awry by yielding too easily to an ideal, and finding herself betrayed, she plunges deeper in, but all the same there is a germ in her breast that smoulders, and often bursts into flame. She regards it as an atonement, and although continuing on in one wrong path, she tries to justify or alleviate it by attempting to follow a right path. To her also the physician is something more than a mere provider of remedies to cure the effects of excesses. "Cure me of this, doctor, and I will never do it again." This is the germ which begins to burn; 'tis

the fire of remorse, the fruit of repentance, and with mildness and gentle insistence, the physician has it in his power to do more than alleviate physical ailments.

President Andrew Sloan Draper of the University of Illinois, in an address to the graduates of the College of Physicians and Surgeons not long ago, said, among other things to which it will be a pleasure to again recur:

"The medical profession stands in exceptionally close relations to its clientele. The doctor knows the innermost secrets of our lives. He scarcely waits at the door as he pushes his way into the innermost chamber of our homes. He is admitted to the most sacred recesses of human feeling, and trusted with the hopes and fears, the loves and perils of family life."

Coming from a layman, the condition is ideal, but were the physician, the professional, himself, to give his opinion it would go far beyond that expressed by President Draper. To this may be added, that upon the physician depends much that is sacred in the relations between the sexes, their proper and decent regulation, and the preservation of the sanctity of the home, the happiness consequent upon the assumption of the marriage state, the proper training of children, and all that concerns man, not only as an individual, but as a social being and a good citizen.

CHAPTER XII

FEES AND HUMANITY

"But hearing oftentimes
The still, sad music of humanity."
—Wadsworth.

IT is an error to assume that physicians are the main exponents of the laws of humanity, the sole guardians of the miseries of mortality. If that were true, "specialties" would be a crime, for he who limits his learning to one branch of medicine exclusively would be putting it beyond his power to benefit suffering humanity through the other branches.

The humane idea fastened upon the medical profession is a relic of ancient times when the priest was also a physician and ministered to infirmities of the soul, while also medicating the body. There was thought to be a connection between them, a sort of domination of the soul over the body, and the former, restored to grace, dissipated the ills of the latter at the same time. There are a few sects to-day who have reverted to that ancient idea, notwithstanding that ages of experience in its banal

workings revolted the world until their entire separation was demanded and enforced, to prevent mankind from sinking deeper into a slough of constantly enduring misery. To-day it is not a religion, it is nothing but a mere fad, or, as politicians say, a "graft" upon the foibles of men, like patent medicines warranted to cure if the patient lives long enough, which seldom happens, and then his death is attributed to the interference of doctors.

The author insists, and repeats what has already been said in this book, that we are all living under changed conditions, diametrically the reverse of those existing in the past. Yet, while all men claim the benefit of the stimulating advance, the medical profession is relegated back to the middle ages. The burden of humanity is laid upon its shoulders, while the guardians of modern philanthropy and charity are competing with one another in the race to amass begged subscriptions for the purpose of practicing philanthropy and charity at the expense of others. Indeed, so far has this left handed interest in the pretended cause of humanity extended, that it is purposed to endow a college for training students in the art of philanthropy—that is, in the science of begging as a means of livelihood! This in the face of municipal ordinances against "professional beggars."

The whole trouble, so far as physicians are concerned, springs from the misapplication of common

sense principles by so-called educators, those professors whom a distinguished Frenchman calls "employés ' in a cage." One of them, the president of a prominent university following closely the "book learning" of Babylon and Memphis, undertook to advise a graduating class of medical students, although he was not a medical man himself, and, by reason of his lucrative State well-fed-at-the-public expense position, had never had a moment's business experience. His advice was so unique that it is well worth repeating in full, moreover, it contains the essence of all the ethics which are administered to doctors as a nauseating bolus to remind them that the only rights and duties they are entitled to possess, are those prescribed by outsiders. This is Professor Draper's remarkable send off to the young and unsophisticated medical students who were compelled to submit to the dose without protest or lose their diplomas:

"Are you looking for wealth? If you are the very fact that you are looking for it makes it probable you will not find it. If your aim is commercial, you should have entered commercial life. A commercialist is out of his latitude in a profession. Selfishness defeats itself in professional life One who withholds relief he may easily give, one who takes advantages of the misfortunes of the poor to harass or crush them is a professional highwayman. I remember hearing an eminent surgeon tes-

tify in a damage case. He was asked what his charge had been. The reply showed that it had been exceedingly small. Asked if that was his usual rate, he said, 'No, but he was a poor man, and I made a poor man's bill.'

"I know where another poor man in the deepest sorrow went into a physician's office for help for his sick wife, and this was said to him in so many words: 'You say your wife is sick and you want me to go and see her. If you have the money in your pocket to pay me I will do it; if not, I will not.' One of these doctors was a glory and the other a disgrace to the profession. The men of reputation, The busy men with the best practice, are the generous, whole-souled men of the profession. They have come to be noblemen in the profession because of their sympathy and generosity."

The radical nonsense of this is in its latter part. How do physicians acquire reputations? How have the busy men obtained the best practice, and what does the professor mean by "best practice" if not the "most lucrative?" Again, by what wonderful method do the men of the profession become "generous, whole-souled noblemen?" Is it perchance on wind? But the earnest advocate of medical pauperism rushes on heedless of consequences:

"There is a common public feeling that there is a system of medical professional ethics, shaped by and for the benefit of the little fellows of the profession, and aimed against the charlatans, the

camp followers and hangers-on of the profession, which too often comes in the way of the claims of the individual patient upon the individual physician. The labor organization and the professional organization are each all right, but it never must be forgotten that they exist for very different ends. Uniformity of fees, division of territory, increase of business by artifice, supporting the brethren of the common bond whether right or wrong, are the last things an honest and reasonably capable professional man wants."

"The professional man" referred to is of course the doctor, for the language was used to a graduating class of medical students. The worthy Professor continues his "advice" and utters a lament, likewise a prophetic warning:

"For one I regret the passing of the family doctor. I regret it not more because of inconvenience to the public than because of the unfortunate influence upon the profession. A great collection of doctors' offices numbering scores, or hundreds, in one building in the business quarter of a great city is on all fours with what I conceive to be the normal work and essential spirit of the medical profession.

"It must adopt forms, beget the methods and breed the spirit of commercialism. It succeeds that system of medical specialization which in reasonable measure is well enough, but which, carried to extremes, rests upon no sufficient formalism,

limits the character, growth and professional development of the individual physician, imposes needless inconvenience and cost upon the public without compensatory advantages and works a marked change in the feelings of attachment between family and medical adviser which have been the charm and main regard of a physician's life work.

"A doctor seeking political preferment makes a sorry spectacle. Down in York State they used to say that when a doctor got into the legislature it was nine to one he was corrupt, and that he had got so in the habit of charging a dollar or two a visit in his little practice that he forgot to raise the price when he was selling franchises instead of physic. Summon the angels of life and truth and mercy to guide you as you move into a noble profession to win the only true success through being useful to mankind."

It is far from the wish or intent of the writer to ridicule any physician's alma mater, or even, ever so gently, to poke fun at the old lady, but if this is a sample of the medical "ethics," prevalent in our great universities and their attached "Colleges of Physicians and Surgeons," it is time to rise and put this serious question: If, as you say, "you see doctors every day, who need a bath, whose very clothes should be burned, whose breath is foul, and evidences are not lacking of the grossest violations of all the laws of sane and healthful living." If "there is too much uncertainty, too much

hideous blundering in medical practice, and human life is trifled with in defiance of well-known scientific truths, which are offences against decency and should be made an offence against law sufficient to land them in jail." Why, it is asked, do our universities persist in annually turning loose upon an innocent, confiding and unsuspecting people an army of these dangerous men. Is it because of the University "fees" that so many recruits in this destructive army are cast upon a helpless community, and if they are given a course gratis, what sort of education and training do they receive to transform them into the degenerate beings specified? Would it not be more philanthropic, more human, a greater public blessing to reduce the number of that complained of destructive army of physicians by accepting fewer students, and devoting more care to their education? The reader can readily imagine the answer to any proposition that will reduce the emoluments, except where the doctors are concerned.

It is not believed that there is a single medical student who heard this diatribe, or any physician who reads it, who will not consider it a gratuitous insult cast upon a body of men who find it as necessary to earn money upon which to live as the commonest sewer digger, and that the more money he can earn, the better is his position and ability to practice the humane, philanthropic, and charitable acts he is daily and hourly called upon to

perform. It is a crime against justice to reduce him to the income of a pauper and demand of him the magnificent generosity of a millionaire. Clergymen every day refuse aid to the indigent who do not belong to their parish, it is not their duty to go outside. It is common for lawyers to refuse to defend the poor who have no money to pay their fees, and nothing is said about it even though they move in the highest circle of philanthropic society. Who breathes a protest against the charity of the proprietor of a great department store, who contributes $25,000 in cash to a charitable institution and recoups his splendid "gift" by marking up his staple merchandise or reducing the wages of his underpaid employés? It is positively silly to single out the medical profession as the only scapegoat, and exact tribute to humanity from it without granting it the power of decently and honestly obtaining the wherewith to pay it. Wherefore, let the reader forget the diversion and return to the neglected mutton—fees.

One of the most important things to be decided when the nature of the case has been determined, is the size of the fee to be charged and the terms for its payment. It is sometimes difficult to estimate the resources of the case before you—what it is possible to pay. It is not always the big fee getter who is the most successful; many first cases are lost because their means are overestimated and the fee over-

sized. The consulting physician who gets the best average is the most successful, for his annual aggregate is the best.

To demand one hundred dollars and lose the case is not so wise as to set the price at sixty dollars and get it. But when it is apparent that the patient is able to pay whatever fee in reason is charged, it is best to name the largest amount expected without reserve, just as if such were an every-day charge. If there is doubt as to the ability to pay, it is well to follow the elephant's plan of feeling the bridge— testing capacity; say that in such cases it is your custom to charge a specific fee, but that you do not know whether the patient's financial condition will warrant the full charge (unnamed). This gives room for talk, and you are free to set a price wherever you please and in harmony with your idea of what you may reasonably expect to get.

One of the commonest of statements made by patients is: "I have been disappointed so often that I have determined to pay out no more money until cured." This is the common attempt to procure from the doctor a guarantee to cure or no pay.

Again, it is quite frequent to make this statement, which is cunning, but too old to entrap a wise physician: "I am willing to bank the money to be paid when cured."

Reply to this: "That will be perfectly satisfac-

tory, Mr. Jones, or Mr. Smith," as the case may be, and will show that you are not afraid of failure. You should know that bankers do not solicit this kind of business—they are not in the "humanity business" for fun, and they do not care to be referees in such matters. If it comes to a "show down" of this character, make the fee large enough and insist on the money being deposited on joint certificate. Make the fee less for cash—about what you would charge in the first place if your patient were fair with you and did not attempt to "bluff." The upshot of your diplomacy will be that the patient will conclude you are certain of your ability to cure him, and the cash fee will be forthcoming if he is at all anxious to have treatment.

The idea is never to see a "bluff"—which all such offers usually are—without "calling" it.

In all cases it is best to let people know they are paying for your professional service for a certain period of time, which is supposed to cover the period required for a cure—that is, the specified time agreed upon.

The advice of a successful and honorable physician the writer has in mind, was to "arrange for the best fee the case will warrant and then do your level best for the patient."

Remember this axiom of the commercial world, as well as of the other professions: "A cheap man is no good." He is regarded as a man of no ability, one who has no confidence in himself, and therefore

can not expect it from others. In every human transaction involving money, bear this constantly in mind: Nobody will offer to increase the price asked for an article, but everybody will attempt to reduce it. This is sound philosophy and needs no explanation as to its manner of application.

CHAPTER XIII

CONCLUDING OBSERVATIONS TO CASE-TAKERS

"Thoughts That Breathe, and Words That Burn."
—Gray.

TO be able to master all the details of case-taking, it is well to learn the fundamental features of all schools of medicine and of all medical cults and fads which engage modern thought. Every school of medicine, and every imaginary school or cult has its advocates, and all have salient features that may be appropriated to advantage by the true representative of medical science. To imitate the supercilious sneer, indulge in the caustic comment of professional bigotry, or to insinuate that those who incline to vague theories show signs of lunacy, is to lose valuable patronage directly. The megalomania of universal education is epidemic and it must be humored.

You will be constantly harassed by gossips, who, to curry favor, will boldly denounce such and such a brother physician, and it becomes a duty to protect him for the sake of your own honor, for you

must not imagine that you will be free from the same kind of "reputation tearing" in your turn. You will even be told that doctor so and so belittles your ability, criticises your methods and picks all sorts of flaws in your practice and personal conduct. Let this fall upon dull, unhearing ears, for it is gossip, tittle-tattle, old wives' tales and fisherman's stories, and out of this indifference to censure or even encomiums, your tale-bearing patient will reach the conclusion: "That doctor is so sure of himself that he doesn't care what others say about him," and confidence will be enhanced. Such people are petty, narrow, and low in the human scale, but it takes all kinds of people to make a world, and the doctor sees a large share of them.

In order to parry properly direct blows in conversation with interviewers, to avoid embarrassing entanglements that arise through the facility with which statements about medicine and doctors may be distorted and used as weapons by your competitors, to unmask misfit ethics, to convince patients they are safe in your hands and insure advocacy, to efface impressions made upon patients by unscrupulous rivals, to nullify skillfully, statements of the prejudiced, to excel others in a practical attitude toward your clientele—in brief, to show yourself able in every way before the people—it is necessary to know more than is grasped in the ordinary curriculum of a medical education. The sum of the additional knowledge is that you are privileged to

acquire by studying every feature of any value in all the standard schools of medicine—Allopathy, Homeopathy, and Eclecticism—and all the so-called visionary treatment fads of the times—Hypnotic, Magnetic, and Osteopathic Healing, Suggestive Therapeutics, Christian Science, etc.

Do not forget that one also

> "Finds tongues in trees, books in the running brooks,
> Sermons in stones, and good in everything."

Familiarity with all systems or schemes of treatment is a wonderful aid to the case-taker. A profound knowledge of all is not essential, but ability to discuss them intelligently fits a physician to answer questions in such a way as to attract confidence—the foundation, always, of professional success.

It is absolute that no man can ever acquire the sum of human knowledge. A medical course at college is but a small drop in the huge bucket, a smattering of principles. A physician's whole life, more than that of any other profession, is a continual post graduate course. He must go back and review at every forward step, and though his great aim must be to become proficient in the specialty he has marked out for himself, he can not, must not limit himself to it exclusively, but, in this age

of general information it is requisite of him to read and study extensively. No man now says: "I fear the man of one book," for there are so many books, but to make the way easy through the labyrinth of knowledge, and perhaps comfort the zealous brother who desires to improve and widen his knowledge, let him understand this: that knowledge generally consists in knowing where to look for things when wanted. In this respect a lawyer becomes wise and learned, and he exhibits a masterful acquaintance with a question which amazes his client. A question is sprung upon him suddenly. He can not answer it because he has not committed all knowledge to memory, but he knows where to find the solution, and he pulls down a book or two, rapidly runs over their pages and reads the answer to his client. Let physicians do likewise when consulting with intelligent, educated patients. Then he speaks from authority, for the majority of men will quibble over words, but when read to them from a book it is gospel truth.

For a patient to conceive that an indescribable something lingers in your make-up which abets your scientific effort in the treatment and cure of disease, is a circumstance of no mean import to you. Let psychological agencies exert their full influence in your work. Pileur says:

"Man may compute the size and distance of the stars, but when he turns to consider the complexities of his own brain he is bewildered."

There is no accounting for the vagaries of the human mind, and as long as they are innocent, we may engage them for our own good. When a patient once believes that your curative powers spring from other sources than a medical college, your personal denial of such possession will not convince him to the contrary It is not deception to let a favorable impression rest which you could not destroy if you tried. It is recognized by all philosophy and religion, that it is a dangerous thing to destroy faith, or belief, in the human mind, unless that faith or belief rests upon an immoral foundation, grows out of some noxious, banal principle.

A careful study of psychology in all its ramifications will be found of great help by those who are disposed to satisfy a rational inquiry, and thereby enhance their chances of being uniformly successful in landing cases and fees.

In these days of ether waves, and wireless telegraphy, particularly, people are prone to attach supernatural agencies to the mysteries of nature which are still inexplicable according to known natural laws. It would not be wise to affirm or deny the causes or results of any phenomena, and the most reasonable and logical method of avoiding a dogmatic opinion in any of these new discoveries is to keep on the border line ready to drop on one side or the other when the evidence is conclusive enough to justify it, and do that without exuberance or ostentation.

"There are more things in heaven and in earth,
Horatio,
Than are dreamt of in your philosophy."

The smoothest case-taker in the greatest western city lets suggestive therapeutics go as far as they may; encourages whatever idiosyncrasy presents; exercises great attractive power, and disarms his patients of all fear—but he cuts deep. He is a good surgeon. He gets the cases and cures them, and this is all that is required and demanded.

It is probably superfluous to caution the case-taker not to attempt to pump any of his occult conceptions into unwilling ears. "Verbum sat sapienti." Lincoln used to say it was impossible to put a big kettle into a little one.

Medicine per se is something tangible, material, and practical. As well give a starving man a tract instead of bread, as to medicate a sick man with spiritual essences, which are not very curative to a man with an abscess, unless he wants them, and then he should be gratified, but with a surgical operation as an adjunct.

In grave cases, impress upon the mind of the patient that, at best, life is always uncertain in the most skilled hands, but you can dwell upon the fact that others have been cured by you who were apparently in as precarious condition. The Angel cried to the sick man, "While there is life there's hope."

There is never a necessity for lying, and the practice, sooner or later, will be productive of "boomerang" results. The vulgar saying, "A lie well stuck to is as good as the truth," is never applicable to the practice of medicine.

Cultivate diplomacy and study the patient's disposition and temperament before trying to apply any of your pet modes of case-getting.

The quiet unassuming demeanor, well fortified by evidence of confidence in your ability, takes the cases and the fees.

The whole course of treatment and management of a case, after it has been successfully taken, is more or less influenced by the character of the impression made by the medical consultant at the first interview. The patient responds to the treatment, which is sometimes essential to a successful cure.

It is as easy at the start to pave the way for subsequent direction and adaptation of treatment to the end of securing a desirable termination of the course planned to effect a cure, as it is indiscreetly to lay the foundation for subsequent disaffection on the part of the patient through his being compelled to undergo experiences that were not primarily dreamed of as possible necessities before the final accomplishment of the cure.

A skillfully outlined plan of cure—not detailed sufficiently to alarm or discourage the patient—

may be given in such a way as to inspire confidence and courage, and to operate as a potent factor in securing the case in the beginning.

Efforts should be directed to the cure of the main malady, for the cure of which application was made for treatment.

Minor disabilities may be taken up later.

Cure of the principal ill complained of lets the physician into the confidence of the patient, and, in most cases, it is then easy to gain his consent to treat and cure all associate or complicating troubles, and, last, but not least, to name and secure a reasonable fee for the treatment of every particular infirmity that may be found to exist.

In successful establishments of cure—medical and surgical—definite systems of both commercial and professional policy are adopted and rigorously enforced at all times and under all circumstances.

Until a physician or surgeon is properly impressed with the importance of assiduously taking care of detail work in the treatment of his cases, and in the commercial supervision of his business, his career will be marred by the element of failure. What duties he can find time to discharge himself should receive his personal attention. Minor details may be intrusted to others whose integrity and honesty have been proven and whose ability is adequate, but no department of his service must be at any time denied his scrutinizing supervision.

A glance at the history of the few specialists in this country, who have been financially successful on a large scale, will satisfy any reasonable person as to the true value of this matter-of-fact observation.

CHAPTER XIV

ETHICAL ADVERTISING

"What shall I do to be forever known,
And make the age to come my own?"
—Cowley.

IT is strange, that though advertising is contrary to standard medical ethics, a standard apparently rigidly enforced by those who have succeeded, and who, fearing competition or diminution of practice, cast obstacles in the way of others, those who do advertise obtain the most successful practice and the richest fees, while those who prefer to remain in obscurity by a too exact observance of a rule imposed upon them by a would-be monopoly of moral ethics, go a-foot and often dodge around corners to escape importunate creditors who prefer a physician's money to his humanity. In other words a physician puts it out of his power to be humane to others, by being inhuman to himself, a queer sort of ethics!

But making one's self known, advertising, in fact, is a universal method of advancing one's prospects, and it affords a very poor impression of the common

sense of mankind to know that it is considered more ethically moral to laud to the skies whatever is harmful to mankind, to the detriment of his health, comfort, happiness, decency, and welfare, than to signalize whatever may be for his benefit, and for the welfare of mankind. To particularize, whisky and tobacco are claimed to be highly injurious to man, physically deteriorating, mentally degenerating, yet it is permissible, nay laudable, commercially, to seduce man into their habitual use by gorgeous, brass band advertising methods, whereas the so-called ethics of the medical profession proclaims him who has printed a four line remedy for these evils in an obscure place in a newspaper, as a charlatan, and an unworthy disciple of Esculapius! Such an ethical system is a barbarity, an encourager of evil, an immorality.

The man who is not a recluse knows, by even the most casual observation, that all classes of occupation and commerce, through hired agents, vie with one another in keeping up interest in the pursuit of all sorts of follies and dissipation. The wine merchant finds a thriving and lucrative trade in what is called "society." The tailor, shoemaker, perfumer, milliner, dressmaker, stockbroker, promoter, politician, railroad man, florist, and confectioner, as well as the butcher, the baker, and candlestick maker, are all flaunting banners, touting their wares, and pulling wires to keep up the merry dance for the benefit of trade. Even charity

and religion are conspicuous in the gay whirl, with their ostentatiously doleful garb to excite sympathy and reap a harvest of dollars and cents to glut their coffers, but the physician? Oh, he is out in the kitchen among the other servants, feeding on scraps and waiting to be called upon to restore the lost vitality of the distinguished throng in the parlor, that they may have energy enough left to grab a few more handfuls of the "root" it would be a crime for the doctor to dig for. The doctor is the man whose humanity extends to the individual in the segregate, whereas, society is engaged in the flim-flam of sending mankind to destruction in the aggregate, the concrete, en masse.

It is advisable for every physician who has the good of humanity at heart, and if he expects to be of any benefit to others and to himself, to come out of his shell, climb out from the bottom of the deep well, down which he has been rusting along with truth, and announce to the world, at least that part of it in which he proposes to labor: "Come unto me, all ye that are suffering pain and are helpless in the grasp of disease, and I will cure you, or at least, assuage and relieve you." This is true Samaritanism.

Whether a medical man drives gorgeous turnouts, connects himself with Sunday schools, churches, clubs and societies, takes pains to give to every newspaper reporter accounts of his individual experiences and the happy results of his being

opportunely called in special cases of emergency, or whether he directly pays the actual coin of the realm for newspaper, magazine or other medium exploitation of his talent and skill, the object is the same, i. e., to acquaint the public with the fact that he is the "Richmond" in the field, and to convey the impression that he is the physician whom it is the better part of wisdom for all afflicted people to consult.

In great cities a different course is required to gain profitable publicity from that which usually wins in smaller cities and towns.

Every physician must be the judge of the best way to make his ability known. There need be nothing shame-faced about this. If you feel that way about it why did you spend so many years in preparation for alleviating the ills of humanity? You are not in a shameful business but in a noble one. All the learned lights of the world are in accord upon that point, if not upon any other; wherefore, take them at their word.

There is no doubt that, in cities of any size, printer's ink, well directed to fit the moods and dispositions of the people, is the best known agency through which to spring suddenly into public notice, and if the effort is backed by brains and genuine capacity in the particular line of practice chosen, but little time is required to step into a large and lucrative practice if the location is a good one and the field not already too well occupied. This, how-

ever, is a matter radically opposed to traditional ethics and therefore not to be considered by those who desire to retain their standing in the medical societies, and to whom the esteem and respect of the regular profession is greater than the desire for financial success alone.

There is one point which should weigh much in this matter of notoriety, which is, where a reputable physician knows his own capacity and powers, and understands how to utilize them. Charlatans, quacks, patent medicine vendors, are the ones who are bringing the medical profession into disrepute by their brass band methods of advertising their nostrums, and their marvelous cures. Not through the fact of advertising PER SE, but because mankind go where they think they can find alleviation for their physical ailments. They read the gorgeous, full page advertisements, fabricated certificates of wonderful cures, "snatched from the jaws of death," as some of them run; read long lists of symptoms in which they find their own pains and aches, and quite naturally rush to purchase the "great cure." Well, they are not cured, and when the modest, unknown observer of the sacred ethics remonstrates, he is told that he is a nobody, a "nincompoop," neither a humanitarian nor a man of ability, a misanthropic critic, for if he were any good he would plunge into this maelstrom of fake medicine and rescue the unfortunates who are being swept into the vortex of destruction, and who do

not know whither to go for relief unless they are told.

Queried Philip to the eunuch of Queen Candace. who was puzzling over Esaias the prophet:

"Understandest thou what thou readest?"

Answered back the eunuch:

"How can I except some man should guide me." And Philip mounted the chariot and expounded. Our Philips would have left him in ignorance through love of ethics.

The adoption of an "ethical" or an "advertising" career, therefore, must be left to the judgment and choice of the individual, who should consider well the step before departing from the accepted standard of professional ethics, for, should he choose the latter course, he must know that it will be extremely difficult to change back should he afterwards regret his course. The question is one of success or failure. If there be ability, tact and good judgment there can be no failure. The half-hearted must remain where they are and not venture out of the beaten track.

CHAPTER XV

ADVOCACY AND PROFICIENCY

"Let your light so shine before men, that they may see your good works."

THE foundation of whatever has been urged by the writer upon the medical profession to make himself known to suffering man, is laid in one, and only one indisputable, inexorable qualification—proficiency. The aim of every physician —no matter whether inclined toward the observance of a rigid system of ethics or advertising—should be, nay, must be to stand at the top in the actual possession of professional attainment and skill. And it also matters little whether one be content to harness his energies to an effete code of ethics, or puts his lighted candle on a candlestick that it may give light to all, his proficiency, skill and ability will find him out and lead him to a greater or less degree of success, extend his power to benefit his fellow man, limited, of course, in the former case by the fact that his light is hid under a bushel.

The reader knows by this time, if he has carefully pondered upon what has been already said, that

advocacy cuts a large figure in both an "ethical" and an "advertising" practice, and it must be apparent as a corollary to the advice given, that those who cannot secure it by benefiting and curing their cases, either fail financially or bring upon themselves the merited censure of an indignant public. To attempt to gain success in any other way is to bring disrepute upon a noble profession, one essential to the welfare, comfort and happiness of mankind, and lead a life of deception, subterfuge and dishonesty that can not too strongly be condemned and obviated by the most effectual prohibitive legislation.

The great mistake, however, in all legislation looking to the suppressing of an evil, is in the senseless, bigoted application of private ideas concerning human rights, and the invariable disposition of the weak and narrow minded to inaugurate what is known as sumptuary legislation. There may be cases, indeed, there are cases, where it is impossible to regulate evils by other than general laws, leaving to the executive power appointed to enforce those laws some common sense discretion, and relaxing authority to distinguish between a harmful, drastic enforcement which is productive of more harm than good, and a moderate application which will accomplish the true intent and spirit of the laws. It is most unfortunate, however, that in most cases the enforcement of restricted laws is placed in the hands of the hide bound, the narrow minded, or

those seeking the applause of, or looking for preferment from the hide bound and narrow minded. The consequence is, there is a revulsion of sentiment, a resistance, ending in the utter disregard of the objects of the law, and the door is thrown wide open for the abuses to creep in that formed the reason and object of the passage of the law. Whereas, if some common sense discretion were observed, if that great warning maxim of interpretation were to be observed "qui haeret in litera haeret in cortice,"—Who sticks to the letter sticks to the bark—not only other rights but the rights of the medical profession would be established upon a higher plane, but the laws of humanity would be more sedulously regarded.

There is only one way for a physician to combat this manifestly injurious tendency of the methods of an exclusive, monopolizing class, and that is by persistently advancing in proficiency. Some time, and that time is not far distant, there will arise a body of skilled, proficient physicians strong enough, in the advocacy of their patients who recognize manifest superiority by successful works, to overturn the moth eaten, banal influences which deter many bright minds from embracing or continuing in a profession so productive of good to humanity.

One point should always be borne in mind: a man is not skilled so much because he knows what to do as HOW to do it. The universal test of ability

is the power to act. It may be, in fact, it often happens, that in a consultation, the consultant physician or surgeon may be a well read man in the particular case his opinion is called for, and yet not be able either to perform the operation himself, or even know how to fill a proper prescription with the required quantities of remedial agents. Without deploring such a defective education, at least it may be said that it is not satisfactory. The "réclame" of it is not advantageous to the ability, skill or learning of the physician who rests upon learning alone, for patients, and suffering humanity in general always look to results—they are personally confronted by conditions, not theories. An owl is universally regarded as emblematic of wisdom, yet when it comes to a practical demonstration, there is not a sillier or more foolish bird in the whole animal kingdom.

To come to the point aimed at: first of all let a physician acquire the knowledge and the skill to fill the bill, that is, in common parlance, to "deliver the goods"—therapeutically or surgically without hesitation or bungling—as called for in any case in his branch of practice, however complicated or simple it may be, and then he will be creating environments which will bring him business in the most rapid manner possible consistent with the rules of honorable dealing, whether his course be justified or not by the by-laws of any or all of the divers schools of medicine extant. The physician

himself, as the writer has been contending all along, is the sole arbiter, judge of treatment, and is not to be harried or thwarted, or his mind diverted from his own ideas of what should or should not be done in a given case, by any set of inflexible rules—he is a law unto himself, inasmuch as he is solely responsible for results.

Doctor Agard once had a patient, who, upon recovering from an attack of malaria, became a confirmed hypochondriac, imagining he was made of glass, and that he would break into pieces if he were handled or even breathed upon. He lay in bed, and to prevent the weight of the covering from pressing upon his fragile glass frame, he was humored by having a series of barrel hoops so arranged that the clothing would be elevated above him, and not touch him anywhere. He presented the appearance of one lying in a small tunnel. Several consulting physicians had been called in, and the consensus of opinion was that he should be let alone to recover eventually, of his own accord, from his hypochondria, though Agard was of the opinion that a good shaking would cure him. "Oh, my, no, doctor, the shock would surely kill him."

Matters went on this way for another week without improvement, and the family not being well to do, could ill afford the possession of a hypochondriac, and they begged the physician to do something to relieve the tension. After thinking the matter over Agard reached a determination. He took

a seat by the bedside, and placed a pail of chopped ice near by, in which he thrust his hand and waited for it to become frost bitten.

"Well, how are you, Dan? What can I do for you to-day."

"Very poorly, doctor. You can't do anything for me. Can't you see for yourself that I am becoming solid glass?"

The doctor began gently to lift the covering with his free hand, and continued the conversation.

"Are you sure, Dan, I can't do anything to help you?"

"Nothing," replied the hypochondriac plaintively. "I will not last very much longer. You can't do anything."

"Oh, I don't know," said the doctor, "how's this?" and he suddenly drew his half frozen hand out of the ice, and thrusting it under the covering, grabbed the warm abdomen of his patient. With a yell, Dan leaped out of bed, and rushing out before Agard could catch him, raced across the street and climbed a telegraph pole, whence he was dislodged only by the assistance of a hook and ladder company. He was taken down, put to bed, and in two days was working at his trade of carpenter.

It has been said, and is here repeated, that a man must blow his own trumpet, nobody else will blow it for him. "What can you do?" is the query on the lips of everybody wanting service, and is the man who is able to reply, to hang his head and not

boldly give a categorical answer? Mark this: There is more honor in standing firmly on your own demonstrated ability and telling—or letting others whom you pay for the purpose, tell—what you are fully capable of accomplishing in the treatment of disease, than in having your shortcomings overlooked, and in being endorsed nevertheless, by a whole society of indignant ethical confreres.

It by no means follows that a man who has put in the required time at college, succeeded in passing the general examinations, secured a diploma and a license to practice, and been elected to membership in the several medical societies and associations, is thereby guaranteed to be a skillful physician or surgeon, fully competent to manage diplomatically and successfully any case that may apply to him for treatment. He must then, on the contrary, be subjected to the test of experience as to his tact, judgment, etc., before he will be accepted by either the public or the profession as being fully competent.

The fact is a doctor's education is never finished. Experience demonstrates every day that a young graduate, fresh from his Alma Mater, with his brow laureled with the highest honors, may have for his very first case one he never heard of, and which his whole curriculum did not provide for. He is confronted with novel cases nearly every day, and he soon finds that he is on the mere threshold of the learning required in his profession. Unless he is

himself a bad case of megalomania, and fancies he knows it all, he soon discovers that he has only begun to learn the rudiments, the elements of a profession that has no bounds or limits. He makes a diagnosis according to what he has learned of therapeutics and surgery, but somehow, his treatment is "off," there is no response. Then he must study, examine, begin anew, shall I say "experiment"? Why not, since outside of a certain routine of human knowledge, the unknown is generally experiment, becoming exact knowledge after the results are propitious?

Preliminary education, a college course, is merely the attempt to cast the diverse brains of men in the same mold, measure them upon an identical standard, guide them along the same lines. This is not education, properly speaking; it is merely laying the foundation for a future education which is to be erected upon it by the graduate himself; no man can aid him, for the workman is his own brain. Men's brains can not be fashioned in the same mold; they are too diverse; and it is this very diversity which creates genius and advances education. At school the student learns elementary principles; the "how" of their application is to be learned afterward; and then begins the graduate's real education, training, and then he manifests his ability, skill and competency; then he is tried in the crucible, and turns out pure gold, and preserved as a

treasure, or, weighed in the balance and found wanting, he is cast on the dump.

Every man's rights are proportioned to his responsibilities, and education brings cares and responsibilities which require strong shoulders to bear without sinking. "To whom much is given, of him much shall be required," and to avoid responsibilities which one has voluntarily and deliberately assumed is to enact the role of a dastard. He who is educated enough to fall into a ditch ought to be educated enough to get out of it the way he fell in or some other way. There is much folly and misery in some methods of education, much bliss in ignorance. "Drink deep, or taste not the Pierian spring."

When Mother Eve bit into the apple, she did not perceive the fine sarcasm in the Serpent's promise, "Ye shall be as gods," and it is possible that few moderns see it yet. When any system of education is administered for the purpose, in a great measure, of fostering and perpetuating prejudice, bigotry, and superstition, it may well be doubted whether that system can be productive of good results. Jerusalem, Athens, Rome, Arabia, and Egypt overflowed with schools of learning, and their wise men have left imperishable records of their vast attainments, yet none of their systems were preserved; even the powerful dynasties that supported them went down with them, and nothing remains but broken fragments, still shining with the splendor of their knowledge, but not one of them with a cure for the tooth-

ache, or a remedy for the measles. India still remains, say some, but her learning has remained stationary, or degenerated into trance mediums, clairvoyants, ghosts, devils, hobgoblins, et id omnes gentes, and a species of fakirism in which the silly, fantastic dreams and disordered fancies of opium-eaters and uneasy women who have forgotten the object of their creation, play the prophet, and darken wisdom with a multitude of idle, unmeaning words.

The object and purpose of education is to render that valuable to mankind which through ignorant use would be detrimental and dangerous. It must lift man up. In these days of progress there is too much education for the mere lust of it. We have the solid masonry of a foundation, but, instead of erecting an edifice commensurate with that foundation, there is a disposition to put up a ramshackle structure, which will constantly need patching and bracing up.

In all this progression the physician can not stand at ease and merely watch the hurrying multitudes as they pass by. He must plunge into the mass, become part of it; bind up the wounds, and alleviate those who stumble and fall in the race. His experience is a constant post-graduate course of studies in his profession, and if he would keep in the vanguard of the race, at the top of his profession, he must revert to first principles, to the elements of his profession, and con over the new applications

that are constantly being made of them. His Alma Mater, every institution, in fact, is seizing upon new discoveries, new methods and modes of applying principles, and this is more apparent in the medical than in any other profession. His own experience draws him into new directions, in the following of which it may occur to him that he is venturing on new lines. To avoid this, and to carry into the general educational fund his own valuable experience, let him take a post-graduate course. It will be helpful to him in that it will strengthen and solidify his own methods, and make him more confident, and at the same time aid the cause of education by the addition of his own fresher experiences, newer ideas acquired by closer environment with the world at large.

CHAPTER XVI

GUARANTEEING CURES

"Canst thou not minister to a mind diseased;
* * * * * * * *
Cleanse the stuffed bosom of that perilous stuff
That weighs upon the heart?"

—Macbeth.

GENERALLY speaking, a sick man desires to be free from his disease for three reasons: First, fear of death; second, anxiety to return to business; and third, to be free from pain; and upon a guarded and wise answer to the question, "Doctor, can you cure me?" largely depends success or failure to get the case presenting itself for consultation. This is the rock upon which a defective professional craft goes to pieces. It is usually the first question asked by a patient after a consultation, and he expects a categorical answer.

Experience has taught the writer that it is best to respond at once to the question in the affirmative, unless the case is obviously incurable, and to qualify the statement afterwards if it is necessary to do so. This is certainly humane ethics, because mental agi-

tation is averse to that reciprocity which the treatment of disease demands.

Hesitancy in action or speech is to be avoided under any and all circumstances. Ready boldness is captivating.

Many people are favorably impressed by a positive manner and positive statement, even though they may suspect that the truth is being used with parsimonious frugality.

The fact is that in this day of science no layman or retrogressive professional has any right to dispute claims made by those who are known to be devoted to scientific research, and who by greater experience have reduced incurability to an inconsequential factor in their treatment.

The general impression prevails that there is no possibility of circumscribing scientific fields, that "all things are possible"—almost—with modern science. To this there would be fewer exceptions in the practice of medicine if patients were as quick to respond to treatment as they are to credit the general fact that nothing is impossible to modern science. It is up to this reciprocal sentiment that the efforts of the physician should be directed, and when it is reached he may safely promise a cure.

This fact is an immense advantage to the specialist, as it is an able factor in enabling him to overcome the disposition on the part of interviewers to discredit statements relative to the certainty of particular treatments or procedures to effect cure.

There is no occasion for prevarication, because those diseases which will not respond to, or are not amenable to treatment, are comparatively few. We may even look to the declarations in the public press by some of the professors of universities adhering to rigid ethics, that disease is a mere vagary, and that human life may be prolonged indefinitely, to back up any statement of curability.

After the affirmative answer has been given, the principal qualification usually is that the patient himself must faithfully carry out his part of the program.

As a matter of fact, almost any sensible person can understand why a guarantee of cure is of little value, and it is well to so enlighten your patient that he may understand that he is paying for your professional services, and not for a promise of cure.

This will engender respect, and, with a clientele who comprehend your exact position and employ you for the sake of your ability alone—of course, with the expectation of cure—a professional life is the reverse of a perpetual burden.

Let people know they are buying your skill—not bargaining for a cure—notwithstanding the great desideratum, the cure, is anxiously coveted. A lawyer is paid for his services; so also is a clergyman. Neither of them can sell a verdict or decision in your favor, or a seat in the heavenly Jerusalem. To do so would be obtaining money by fraud.

When ignorant people apply for treatment, they

sometimes insist on a written guarantee, and any kind of paper, signifying to them that a cure is "guaranteed," seems to be satisfactory. In such cases the only writing that should be signed is an agreement to treat the case for a fee stipulated during a stated period of time.

At all times a good point is made by illustrating the folly of guaranteeing anything relative to the certainty of human life. Such a stand always increases the respect of your patrons, and in the consultation room it is often a greater element of success in taking cases and fees than the unwarranted custom of "guaranteeing" everything that it is desired should happen in the patient's favor.

It might be well, in cases where patients seem to insist on a complete and unconditional guarantee of cure, against every contingency, to intimate that you are not specially authorized by any law, either human or divine, to conduct a life insurance business, or usurp the special prerogatives of providence. This will usually show them the unreasonableness of their demands, and, if aptly and diplomatically brought out, will tend to increase their respect and confidence for your honesty and integrity in refusing to guarantee the impossible.

Answer positively always, and guard your promises cautiously, if you desire to be a success in a single community, and avoid the necessity of obsequiously quitting one community for another to follow the pursuit of happiness and an objection-

able line of business policy that sooner or later redounds to the dishonor of any physician who adopts it, namely, that of contracting to do impossible things and of laying yourself liable to the imputation of dishonesty in procuring money by unfair and fraudulent pretences.

It should be the aim of every physician to know why every medicine he uses is prescribed, so that he may be able to assign a rational object in the use of any prescription or remedy.

Ponder the wisdom of the physician who declared "that man to be the first physician who knew how to wait for, and second the efforts of nature."

He makes a mistake who does not always strive to abet and reinforce nature's methods. Every physician ought to know that nature always works in the direction of a cure, and if she does not accomplish her purpose it is because the patient is working against her. Let the physician take the side of nature against the patient and then he will be in a better position to know whether he can effect a cure, than if he yields to the whims and caprices of the patient.

It is always a question with the physician—general practitioner or specialist—as to the advisability of stating frankly all the plain facts to the patient or his friends in cases that appear incurable, and as to the propriety of proclaiming the recognized approach of the grim reaper.

On this point a contributor to various standard

publications recently gave his views. He said that cruel bluntness took away the remaining rallying power of the patient and was not justifiable until the rustle of the wings of the death angel could be audibly defined. He said, further, that the truth unskillfully handled was a cruel weapon, and no doubt was sometimes the direct cause of hastening death at a time when there was still a fighting chance left, which, in other cases of apparently equal gravity, had been known to prevail by enabling the subject to hold out over a crisis after all hope of recovery had flown. Naturally, different views of moral and religious ethics are entertained by different people, according to their various religious precepts, those should be gracefully yielded to as already intimated unless improper or immoral.

When there is doubt about a cure do not emphasize it; the case may possibly get well, despite the doctors and their drugs. Nature herself sometimes does astonishing things when left to herself, or gently aided.

Encourage every human being to hold out for a cure—your promises tempted by common sense—unless the hand of death is X-rayed, so to speak, on the disk of your keen professional perception.

It is always wise to refrain from predicting positively a fatal termination of any illness, no matter how fatal the malady may seem, or how certain you may feel that it will so terminate. Nothing is to be gained by such a prognosis, and, despite their

anxious urging you to express your opinions freely and frankly, it will have a depressing effect on both the patient and his friends should you predict a certain and early dissolution.

CHAPTER XVII

THE PROMOTION OF PROFESSIONAL PROGRESS

"Precept upon precept, line upon line,
here a little, and there a little."

ALBERTUS—"How to Get on in Practice" (Edinburg Medical Journal, 1881-2, Vol. XXVII, pages 348-352) says, substantially:

"No man ought to expect to prosper professionally unless he has really done his best to deserve success by the earnest prosecution of his studies prior to his admittance to the profession."

For that matter, to achieve the greatet success viewed from any standpoint, it is necessary never to permit relaxation of effort in grasping every scientific fact evolved from time to time, which has any bearing on the particular branch of medical or surgical science to which an individual practice may be restricted. As has already been said, a physician is always pursuing a post-graduate course of studies, that is, if his aim is upward, and he has his "wagon hitched to a star."

He says further, what implies that "luck is not

an element of success," but that success perches rather on the banner of those who duly estimate all conditions and circumstances. He admits that certain personal attributes, born with some men, may turn the scale of prosperity in favor of the posessor, but he claims that many of these helpful characteristics may be cultivated by all. In other words: "The race is not always to the swift, nor the battle to the strong." The hare was too confident of his prowess, and he went to sleep, permitting the tortoise to reach the goal ahead of him. Let the man who plods remember what Paine said about the brilliant Burke, when he is confronted by a brilliant competitor: "And the final event of himself has been that as he rose like a rocket he fell like a stick."

This writer points out many precepts worthy of careful thought by physicians in every field of practice. Some of these may be commented upon interestingly and with profit:

"The patient's malady may be slight, but it is not altogether so in his estimation, or he would not seek advice or treatment." Application to another physician will be made if due consideration of the case is not forthcoming.

Furthermore, apparently slight ailments often herald grave maladies. Inattention to what may seem trivial ills, may result in havoc to the patient; if not, it will usually impress him that the physician is ignorant, an impression which will be fatal to fee getting and desirable advocacy.

"If a case is a grave one, your whole sense of responsibility should be called forth in ministering to your patient's welfare." The patient is part of yourself; you have taken charge of him, and you are bound to him.

To impress the patient that you have unloaded your whole sympathy, and that your are very sensitive to the gravity of his case, is not policy, because by doing so you weaken your attitude as one having at your command absolute means of cure upon which you can depend. In other words, to make use of an expression common to the commercial and legal professions: "Do not give yourself away." Something must be held in reserve for a final "coup," something left over to "clinch" with.

Sympathetic lacrymation will make a fool of the doctor in the estimation of his patient, no matter how great the impending crisis may be. The reason for this is not far to seek. A sick man is always a weak one, and he wants strength greater than his own to lean upon. His idea of a doctor is that he is a "sustaining rod," but if he finds him a weak reed he loses hope, or tries a stronger man.

"One physician thinks of his own credit mainly, while another shows by his whole manner that it is benevolence which preponderates, and that he is feeling more for his patient than for himself."

The demeanor of the latter, it is claimed, "strengthens the confidence reposed in the doctor and probably expedites the curative results of the

means which are employed, and subsquently leaves a pleasant impression in his favor."

This sort of reasoning is defective. The fact of the matter is that during the actual work of treating a case, therapeutically or surgically, the physician to be enlisted should be one who has no other thoughts in his mind than those appertaining directly to the scientific and thorough adaptation of remedies and curative means and measures embraced within the circle of his mastery of human malady or of injury, irrespective of what any one may think, say or do. "By their works ye shall know them," and in this marvelous age of progress it is becoming more and more the disposition of the people to encourage skill to supplant sentiment.

This is common sense. There is no necessity of a medical man being a cynic or an icicle, impervious to all sentiment, but antiquated notions of bringing a physician's sentiments into harmony with the ofttimes irrational ideas of patients and their friends, in order to secure patronage, are rapidly being exploded. If tears were essential to a doctor's practice, I should be the last one to deprecate them, but long experience has demonstrated that a patient prefers one small dose of satisfactory medicine to a barrel of tears. Too sympathetic a physician is usually rewarded with a sympathetic fee.

It is becoming an age of experts, and the foolish custom of trying to mix incompatibilities of lay

and professional sentiment to help the doctor "to get on in practice" will before long be entirely abandoned.

People now say of a doctor who has superior abilities, "Well, he has his faults, but we think he is the best in his line of practice—he is there with the goods," etc., etc.

Having made up your mind, adhere firmly to the advice you have given. Do not try to justify your proceedings by reasons which in the nature of things must be unintelligible to the unprofessonal mind. If you give a single inch, the patient will infer that your mind is wavering, and, as a consequence, his confidence in you will suffer or be entirely lost. These are hard facts, and so is this: "It is better to cause temporary annoyance, or even displeasure, than to awaken the idea that your opinion is unreliable." Ye gods forbid!

Better to be a pirate or a brigand than to be ignominiously branded as an incompetent, the result of which would be to drive a physician to brigandage to make a living, or into street corner tooth drawing.

Not all may possess the precaution particularized and admired by Syme: "Never to be surprised at anything, never to ask the same question twice, and never to felicitate yourself on the good effect of your remedies unless you are sure they have been used." But remember that these faculties may be cultivated. Many a physician has been "fooled" by

a patient who feels so much better that he does not take the prescribed medicine, but tells the doctor he has. Of course the doctor ought to be able to tell whether his remedy has been used or not. If it has not, and the patient leads him to believe it has, what opinion can that patient have of that particular doctor?

A forceful element of success is to induce your patrons to believe—and to believe firmly—that you are always determined to spare neither time nor trouble to secure perfect results in every case undertaken, and that you are always anxious to accomplish a cure with the utmost dispatch, for their good, as well as for the purpose of economizing your own valuable time.

When it is observed that a physician or surgeon allows extraneous pursuits to engage his time, the impression soon prevails that his disposition is to subordinate the practice of his profession to them. Days with dogs and guns, golf or any fad may be beneficial, but it is well to veil indulgence in sport and recreation from the eyes of a suffering clientele. This can be done successfully. It is advantageous, however, to medical men for it to be known that they take deep interest in all matters of science, literature and significant current affairs, that they are wide awake to the needs of the people and diligent in the endeavor to further ways and means for the benefit of all mankind.

Showing an article written by him in a medical

magazine enhances a physician's reputation. A good library, attending meetings in the cause of philanthropy, subscriptions to hospitals, etc., and other practices which will occur to anyone, to show that he is interested in everything pertaining to the uplifting of humanity, are valuable adjuncts to advocacy. It is far from being hypocrisy for a doctor to adapt himself to his environments for the purpose of succeeding in his practice and in acquiring a good reputation. It is an honorable and laudable endeavor which every profession sanctions, except the boorish members of it who seek to gain notoriety by eccentricity.

It should be made plain by the professional man that he is the equal, if not the superior, of others in matters of general information. This will help clinch the impression that he is also an able medical man. This can be done without belittling any other brother, which should never be done under any circumstances. People generally can not separate the personnel of a man from his profession, so the profession is degraded by throwing mud on its members. A patient will sometimes say: "Doctor Smith is of a different opinion from yours in such and such a case." It is not necessary to say that Doctor Smith is a d—d fool, which may very well be, but a pleasant, "Oh, we are viewing things from a different standpoint, and, as we are not working along the same line, I am right," is suf-

ficient to intimate that you know better than Doctor Smith.

Cheerfulness, not joviality, and liveliness, not hilarity, add advantages of temperament. As the writer has already observed, a doctor's office is not the ante-room of a funeral director, nor yet is it the lobby of a vaudeville performance.

For a man of naturally grave or demure turn to attempt to be different from what he really is quickly betrays him and his motive to those he aims to impress, and the effect is uniformly disastrous. Be yourself.

A happy desideratum, and one conducive to the promotion of professional progress in every possible phase, is the possession of several sterling qualities—unimpeachable integrity, trustworthiness of confidence, abhorrence of gossip and innuendo, hatred of disposition to disparage others commercially, socially, morally or mentally, in brief, a good conception of the Golden Rule, with the desire to adopt, adapt and be guided by its grand injunction, and an insistence upon its application to doctors as well as to other professions.

The ambition and aspiration suggested in Addison's "Cato" are worthy studious thought on the part of all representatives of the healing art:

"'Tis not in mortals to command success,
But we'll do more, Semphronius, we'll deserve it."

CHAPTER XVIII

SIDE STUDIES AND SPECIALTIES

"Histories make men wise, poets witty; the mathematics, subtle; natural philosophy, deep, moral, grave; logic and rhetoric, able to contend."
—Francis Bacon.

ONE thing which cannot be insisted upon too strongly is: the physician, in common with the rest of mankind, is a social being, and one more sought than others, by reason of his employment and the culture that necessarily belongs to one of the learned professions. But, while conceding him to be a social being, he should consider himself superior to the rank and file of the ordinary people he meets in his social and business engagements. With this point well digested in his mind, he will perceive that to make himself "common" is to depreciate his value and lower him in the public estimation. It is not necessary for the idea of dignity to be interpreted by what is known as "pride," for a physician may enjoy the lawful pleasures of life, and indulge his geniality to the fullest extent, and at the same time

preserve his native dignity in that which naturally accords with his profession.

As a member of a learned profession, he is looked to for a solution of the numerous social problems now before the world, and he is expected to be ready, with a ready tongue, to advance a lucid opinion where social amenities demand that he should speak. To do this successfully he must keep himself au niveau of what is going on in the world, and prepare himself by gleaning information which, while not essential to his professional duties, nevertheless fit him to establish himself in the good opinions of his fellow men and aid him in acquiring that reputaton for ability and education so necessary for him to attain success in his profession. He must be a man of wide general information, as well as a remedy-bearing agent in the great human comedy.

In your early practice it is almost certain that your time will not be wholly occupied by the demands of business, and you cannot take a wiser step than to qualify yourself in some branch aside from your other work, which shall furnish recreation and entertainment and result in lasting benefit. Cultivate industry and be sure that you do not make yourself commonplace by permitting your office to be the rendezvous of chronic visitors and loafers. Be as exclusive as circumstances will warrant without laying yourself liable to be called a crank or a curiosity, and put in your spare time in

the study of microscopy, electricity, chemistry, botany, music or some other equally interesting science. One of the most fascinating studies is of the use of the instrument which Dr. Holmes called "the telescope of the inner firmament"—the microscope.

There is no more fascinating study than the microscope, although it must be confessed it is seductive enough to demand the consumption of a large part of a physician's time. He feels that he is traveling along the borders of another world, and beyond the infinitesimal visions that flit across the objective there are still shadows of lively denizens of the microscopic world which no glass has yet been constructed powerful enough to resolve. He is always fancying that he is on the verge of some new and great discovery.

When a patient called on Doctor Sterling he took a drop of venous blood, placed it on a glass slip under his microscope, and if the corpuscles "stuck together like chestnut burrs," as he expressed it, he knew that there were zymotic indications, and his treatment followed that diagnosis. Doctor Sargent always tested under the microscope the urine of his patient for uric acid, the crystals of which could not hide from the polariscope. A thousand instances might be given of the great value of the microscope in general practice without converting the physician into a confirmed bacteriologist whose motto is:

"Every big flea has a little flea
Upon his back to bite 'im,
Every little flea has a lesser flea,
And so on ad infinitum."

In these days of universal knowledge, where the sciences are split up into details, and all occupations drifting into branches, even mechanical work now being done by division of labor, every man being restricted to a certain part of work, and remaining in it all his life, it is not surprising that the medical profession should tend toward specialties. While a physician may acquire skill in the general practice, no less now, indeed, than in former times, yet it is certain that if his mind tends toward one certain specialty, and he shows an aptitude for that, he should develop it, and progress as far as may be in it, without, however, losing his hold on the general practice—that we do not advise.

It is too late now to decry specialties, and as they are in many localities a necessity, the physician who feels "called" to one branch of the medical science more than to another would fail in his duty to himself as well as to humanity if he abstain from perfecting himself in that in which he may attain eminence.

Bulkley defines a specialty to be "a particular branch of science or art, or even some individual disease to which special attention has been given,

or in which, from any circumstance, a medical man is exceptionally well acquainted."

Medical specialties exist, first, because the general field of medical knowledge is too vast for the comprehension of one mind.

Second, medical specialties follow the lead of other branches of science, which are all divided and subdivided so that no scientist pretends to grasp the whole perfectly.

Third, medical specialties exist because there is a public demand for them.

It is true, also, that "the poet is born, not made." This axiom applies equally as well to the specialist as to the poet.

For the reason that the field of medicine is too broad for any single capacity; that, like other sciences, the natural course of things is toward the adoption of specialties, and that the public demands them, one should choose the specialty for which a preference is entertained, and for which, as nearly as can be conceived, one is especially designed and adapted.

As to the preliminary study of those who intend to follow a specialty, a few observations are pertinent, as they have been evolved from a practical mind, well known in the profession:

"In beginning the study of medicine proper, the idea of a specialty should be kept entirely out of mind, and the most thorough course of medical study possible should be followed. And if the

medical man is subsequently to give his attention to one branch exclusively, it is all the more reason that he should have a foundation and groundwork thoroughly and perfectly learned. It is a constant lament of specialists that there is so much outside of their specialty which they would like to know, but which their subsequent press of work prevents their acquiring. No portion of a thorough medical education is ever wasted in preparing one for the practice of a special branch. Sooner or later every particle of medical knowledge which can be acquired will be brought into requisition. The importance of service as an interne in a hospital cannot be overestimated.

"The future of medical practice will be that every practitioner will be more or less of a specialist, excelling in some particular direction."

The writer has only to add that every physician should not neglect a post-graduate course as the best means of keeping himself in the vanguard of medical progress. This has already been suggested and it is here advised as almost a necessity.

CHAPTER XIX

EVERY MAN HIS OWN DOCTOR

"A little learning is a dangerous thing."

A SOURCE of annoyance to the medical profession which neither time nor education can ever overcome—indeed, education of a certain kind makes it worse—is the universal presumption on the part of the rank and file of all classes of people to force their advice and prescriptions upon people afflicted with any form of human malady, under any and all circumstances. Everybody pretends to have a specific, a cure-all for all diseases.

Merrick says: "How often do we meet with men who are good shoemakers, good farmers and good citizens generally, but who cannot, to save their lives, tell whether the liver is in the abdomen or in the thoracic cavity, or whether the diaphragm is attached to the ribs. Yet such men will dictate to the physician who has devoted his whole life to the study of the human machinery and the effect of medicines. In fact, we are a nation of doctors.

Scarcely a disease can be mentioned but that every man you meet has a remedy for it."

Indeed, books are written upon the subject of "Every Man His Own Doctor," and many people devour the contents and start out hunting up sick people in the neighborhood upon whom to experiment. Whatever the book says, that they administer. Even when a doctor is called in he is often confronted with this kind of a book and told he must give what the book says. Whenever some people feel a pain in their great toe they consult the book and find that the symptom points infallibly to some form of liver complaint, and they dose for their liver.

A patient in that blissful state of ignorance must be humored after a fashion, although it goes against the grain, but by harmlessly deceiving him into taking the proper remedy for his malady, and undeceiving him afterwards by showing the evil effects that would have ensued, the patient is likely to derive some benefit from the treatment both physically and mentally.

A good-natured, bluff old family doctor by the name of Burling, way down in Stamford, Conn., allowed his patients to "run" him pretty much as they pleased, but in humoring a patient once—a woman—he got beautifully fooled. She was confined to her bed and was really in a bad way. She imagined she had swallowed a very young snake long before while drinking out of the well bucket

after dark, and that it had grown until it filled up her entire stomach and greedily ate everything she swallowed.

After trying all sorts of vermifuges in the vain expectation of dislodging the reptile, the woman told him that she had read somewhere that snakes were passionately fond of milk, and by placing a pan of it near their haunts they would be attracted out in spite of themselves. Burling took the hint and consented to try the experiment.

By bribing some small boys, he procured a good specimen of garter snake, and, depositing it in his coat tail pocket, went to visit his patient. To make sure, he first gave her a quick emetic, and, procuring a pan of steaming fresh milk, proceeded to try the experiment. He lifted her over the edge of the bed, face down, with her mouth wide open to give the snake a chance to escape into the milk, and when the emetic began to operate he pretended to work at her throat by rubbing it up and down. When the proper time arrived he made frantic efforts and, suddenly exclaiming, "Here it comes, look out," dropped the snake in the pan with a great splash just as the woman's stomach turned inside out.

"There, now, don't you feel relieved? Gracious, what a monstrous snake; it is a wonder it did not kill you!"

The woman reached down and turned the snake over and over, then began to sob.

"It's no use, doctor; this is a male snake; the one I swallowed was a female."

In order to manage successfully any particular case it will often be found necessary to combat the meddlesome proclivities of some people by warning your patients against any interference with the plans laid down by you for the accomplishment of a cure, declaring that your treatment has proven fully adequate in emergencies like the one under advisement and that knowledge reaching you of any departure from your treatment, for the purpose of experimenting with some remedy or prescription of friends, or out of the "Family Doctor" book, will constitute good cause for your refusing to be longer considered as having charge of the case.

If you permit every one who chooses to introduce remedies or treatment aside from or in addition to your methods and measures, a patient will soon hold your professional capacity in contempt, think he knows as much as you do about medicine, and the result will be an ignominious defeat of your efforts as a physician and surgeon, and most likely your services will soon thereafter be dispensed with permanently, and a newly filled grave be charged to your incompetency.

It requires skillful diplomacy to obviate the bad effects of this half-baked knowledge of medicine so prevalent everywhere, and sometimes a little over-reaching of the lay knowledge by something incomprehensible to him will have a good effect

and make him understand that he does not know so much about the effects of remedies as he thinks he does.

Doctor Austin was a skillful practitioner who understood the art of using actual knowledge, expressed in technical terms, to overawe these "knowledgeous" meddlers with his treatment. He happened to be one of many physicians sent to a small town in northern Ohio during the dreadful epidemic of Asiatic cholera in 1849, when eighteen hundred out of a population of thirty-five hundred succumbed. Very little was known about the disease at that time, and no remedy had yet been discovered to stop the vomiting and purging that carried off the victim in a few hours. Among those who volunteered their lay services as nurses and aids to the physicians was one of these "smart Alecks," known by the name of Riker, truly a kind service, everyone must admit. But Riker knew all about the cholera and how to cure it, and it was not long before he began to give Austin directions how to treat it. The doctor submitted patiently, because he did not wish to hurt the feelings of an otherwise good nurse, and if he drove him away he could not be replaced very well, as the work was one of love.

One day, however, Austin was afforded an opportunity of stopping this foolishness, and he seized upon it with alacrity. A German hotel keeper, weighing in the neighborhood of three hundred

pounds net, was taken down with what was supposed to be an attack of cholera—when anything was the matter at that time it was always the cholera—and Riker was sent for in post haste to do what he could while waiting for the doctor. He began feeding his patient with table salt as a corrective for the vomiting, and large doses of calomel as an alterative. This treatment he kept up in ten-minute doses until the doctor came.

As soon as Austin had looked the patient over he inquired:

"What have you been giving him, Riker?"

"Oh, just salt and calomel to keep him up till you came," replied Riker, pointing to a half-empty two-pound bag of salt.

The doctor looked grave, felt the man's pulse, scrutinized his tongue, examined the pupils of his eyes, and made numerous other impressive examinations while Riker stood and looked on.

"So you gave him salt and calomel, eh? That all?"

"Of course; that was enough; I have had great success with them in some very bad cases," answered Riker complacently.

"Well, well," said the doctor, with a disapproving shake of his head; "you may be right; but, Riker, there is nothing the matter with this man except too much beer and whisky, but you have fixed him so that he will not last an hour longer unless I can

save him. You have been feeding him corrosive sublimate, the most deadly poison known."

"Corrosive sublimate!" exclaimed Riker, turning pale. "My God, doctor, how can that be? I've given him nothing but salt and calomel, and plenty of them."

"That's just where you made a mistake," explained the doctor suavely. "Corrosive sublimate is a chloride of mercury, as you know, and you have gone and mixed in his stomach the chloride of sodium and mercury in the shape of calomel, which makes corrosive sublimate, don't you see?"

Riker was badly frightened, but Austin generously consented to say nothing about it if the nurse would abstain from dosing the patients in future, which Riker readily agreed to. The patient got well, but Riker always contended that a man who could recover from a simultaneous attack of Asiatic cholera and corrosive sublimate was not born to die in any ordinary manner.

CHAPTER XX

PRIVILEGED COMMUNICATIONS TO PHYSICIANS

ALMOST important duty a physician is often called upon to perform is that of a witness in a civil or a criminal case. Statute law in all the states of the Union hedge the physician and his patient about with a wall of privilege, which has grown out of reasons of public policy, as will appear in the following pages. Like the clergyman and the lawyer, the physician's consultation room and his treatment of a patient are strictly confidential, secrets which he may not reveal of his own accord; indeed he will not be permitted to do so however much he may so desire.

This is a point which should be clearly understood by every physician, and his patients made to understand it thoroughly, for it is as much the corner-stone of confidence in the relations between the medical man and his patient as the confidence that the doctor will cure him is the keystone to his faith in whatever treatment he receives.

Numerous curious points in evidence grow out of the relations between the physician and his patient;

his testimony is invaluable in a large number of cases, and efforts are common to persuade him to reveal his information. Divorce on the ground of infidelity, which may often depend upon secret disease, is one of the cases where the physician is often beset with hopes and promises of large reward if he will betray the confidence of his patient. In probate or testamentary cases he is practically the star witness, for enormous estates sometimes hang upon the proof of which of two persons dies first. So, in insurance cases, where the company sets up as a defense that the insured has made a false and fraudulent statement in his application. The physician may have treated him for some disease which the application declares he never had, or he may have stated that no consumption ever existed in his family, when the physician knows professionally that the applicant's father or mother died of the disease.

It is difficult for the physician to steer clear of the difficulties which are liable at any moment to entangle him, and to enable him to understand where he may stand, and to put him in possession of the knowledge that will aid him to avoid mistakes that might be fatal to his practice by destroying the confidence of his patients in his integrity, a resumé of all the law on the subject of privileged communications between physician and patient is here given.

The physician will understand that every case

stands upon its own facts, but by knowing general principles he may apply them to any given case without any very great departure from the rights of his patients or himself.

Communications from a patient to his physician were not privileged at common law, but on the ground of public policy statutes have been enacted in this country forbidding the disclosure in evidence, against the will of the patient, of information acquired by physicians in their professional capacity.

But the relation of physician and patient should exist, or, at least, the circumstances should be such as to impress the patient with the belief that it does. It will be observed that all the benefits of the doubts are in favor of the patient and not of the physician. It is not, however, necessary, in order to exclude the testimony of a physician, that he should have been employed by the patient directly; for, if this were required, the fact that physicians are frequently called in by other physicians for consultation, or by friends, or even strangers, would largely destroy the usefulness of the statutes.

Where, however, a physician is sent by the prosecuting attorney to examine into the mental and physical conditions of a prisoner, to make a report thereon, he is not privileged, unless the prisoner be led to believe that the object of the visit is to give him professional attendance of which he stands in need.

In some states, in order that the quality of privileged communication be applicable, the physician must be "duly authorized to practice physic or surgery" according to the law of the state, which puts all those trifling with quacks in a predicament if there is any evidence adverse to them sought by the courts.

In any event, the physician must have acquired the information while acting professionally. Where a physician pays both professional and social visits to a patient, and is unable to separate the knowledge acquired as a physician from that acquired as a friend, his entire testimony will be inadmissible as privileged.

Under the term "patient" as used in the various statutes are included those persons under a disability, such as infancy, lunacy, etc.

Not only are direct communications between physician and patient privileged, but the law applies in all its force to communications between physicians attending or consulting in the same case. In cases where the intervention of other persons, as interpreters, is strictly necessary to enable the parties to communicate with each other, disclosures of confidential communications cannot be made.

The prohibition against a physician's directly giving information acquired while attending a patient excludes his examination as to any information so acquired, whether actually obtained from statements of the patient or of others present at the

time, or gathered from his professional or surgical examination.

A physician will not be allowed to disclose the nature of the disease or ailment for which he treated his patient, and it has been held that the prescriptions of a physician for his patient could not be introduced in evidence, or their ingredients explained. Moreover, a physician cannot be allowed to testify as to his patient's previous state of health, where his only knowledge is acquired from an inspection of and conversations with the patient or his physician. While the privilege is very generally restricted to information necessary to enable the physician to prescribe for or treat the patient, the tendency of the courts is toward a liberal construction of the rule, and the presumption is that the information would not have been imparted except for the purpose of aiding the physician in prescribing for his patient.

The privilege may be claimed by the patient or his personal representatives, or the beneficiary in a policy of insurance on the life of the patient, but the burden of proof is on the party claiming the benefit of the statutory privilege to show the facts which bring the case within the statute.

There are some limitations upon the rule excluding confidential communications between physician and patient. The fact that a doctor is the family physician of a certain person, or attended him professionally, and the dates and number of

his visits are not, as a general rule, within the prohibition of the statute, and the physician may be permitted to testify thereto. But it has been held that where, in an action on an insurance policy, the defense was a breach of warranty or false representation on the part of the insured in his application consisting of statements that he was in good health, whereas, as a matter of fact, he was suffering from a disease of the throat and tongue, it was not allowed certain physicians to testify that they were specialists in such diseases, and had been called upon by the insured for professional treatment, as this violated the spirit of the statute.

In testamentary matters, in disputes between parties, all of whom claim under a decedent as heirs at law, devisees, legatees, or personal representatives, either party may call the attending physician of the decedent as a witness, and the rule of privilege does not apply.

In some states even this departure from the strict rule of the privileged communication is not permitted where the facts would tend to disgrace his memory. In addition to this regard for the rule, it has been held that in the absence of any such statute a court might well prevent the blackening of the memory of the dead by such evidence.

Where the communications are made to a physician for an unlawful purpose, the privilege does not apply. Such a case would be, to procure an abortion, etc.

The fact that a third person was present at the time a physician learned certain matters concerning his patient does not render the physician competent to testify thereto, though the third person may testify.

Where two physicians are partners, one who is present at a consultation between the other and a patient cannot testify as to what took place during such consultation.

These statutes extending privileges to physicians are applicable in criminal proceedings as well as civil, unless the matter as to which it is sought to introduce the testimony of the physician would throw light upon the guilt or innocence of the prisoner, in which case the privilege does not apply.

A physician may, however, be examined as to an autopsy of the body of a person who was not his patient in life.

In the case of proofs of death it has been held that statements or affidavits of the attending physician of a deceased person furnishd to an insurance company with the proofs of death are not privileged. But it has also been held that the certificate of an attending physician filed with the city board of health as to the cause of the death of certain relatives of the person insured is not admissible in an action upon a policy of life insurance, although the defense was a breach of warranty that such relatives of the insured had not died of consumption.

However, a physician who has attended a patient may give an opinion as a witness upon a hypothetical state of facts expressed in a question which excludes all knowledge of the condition of the patient derived while in professional attendance.

Where the patient sues the physician for malpractice, the rule of privilege does not apply as to matters connected with the treatment of the injury or disease, or the operation, in reference to which the malpractice is alleged, but all these matters may be fully disclosed. The mere interposition by the patient of a general denial, in an action brought against him by the physician for payment of his services does not, however, prevent the application of the rule of privilege.

The privilege remains in full force until removed by the patient or his representatives. It does not cease upon the termination of the relation by the death of either. The privilege being one in favor of the patient, he may waive it either personally or by attorney, and where the patient is an infant, that is not being sui juris, without the power himself to waive the statutory privilege, it may be waived by his parents, and, after the death of the patient, the privilege may be waived by his personal representatives. It has been held, in connection with this waiver right, that a physician could not be compelled to answer a question as to the

cause of a disease for which he treated the patient, even where the patient has waived the privilege.

A waiver from the patient need not be in any particular form. A patient waives the privilege where he testifies as to privileged matters, or calls the physician to testify thereto. But there is no waiver involved in testifying generally, or offering the physician as general witness on other matters.

It may not be amiss to add to the foregoing that physicians are in constant demand in probate and insurance cases, and are often put to much inconvenience by dancing attendance upon a court room. There are not many cures for this sort of thing, which frequently interferes with an emergency or other important case, which cannot be delayed or neglected. In all civil cases between private parties he is not obliged to obey a subpoena by either party when he demands his witness fees in advance and they are refused. If tendered, however, they must be accepted, and in that case he is bound to attend. This applies to cases in which he is called to give general testimony; where called upon as an expert he may fix his own fees, some physicians demanding and receiving for such services from fifty dollars per day upward, according to the importance of the case. This matter will be gone into in detail in the chapter on Expert Medical Testimony.

To conclude this subject it may be well to state

that physicians are generally exempt from jury duty, that is, they are at liberty to plead their profession, as a valid excuse to be relieved from either grand or petit jury duty, but the privilege is for their benefit and may be waived.

CHAPTER XXI

EXPERT MEDICAL TESTIMONY

EXPERT opinion evidence is testimony in the form of an opinion based upon facts proved or assumed concerning a matter involving scientific or technical knowledge, and not within the experience of the ordinary witness. This is an abbreviation of a definition established by all the courts.

This kind of testimony is an innovation in courts, where formerly only the testimony of witnesses concerning the actual facts in a given case was admissible. The change was first made in the case of medical witnesses whose opinions were given for the purpose of enlightening the court, and reached the jury only through the medium of the court's charge.

As early as 1353 in a case involving the criminal charge of mayhem, in England, surgeons of skill were called "to inform the king and his court" on the point as to whether the wound inflicted constituted mayhem—that is, a bodily injury which rendered some member of the body useless. And in 1619 "two doctors of physic" were summoned

to testify in an ejectment case which turned on the question of the legitimacy of a posthumous child, which was alleged to have been born too long a time after the death of the father to be legitimate. But the doctors testified that ten months might properly be the time mulieribus pariendo constitutium, and the child which was born forty weeks after death of the father was therefore declared by the court to be legitimate.

The practice of employing expert testimony spread until it covered all classes of cases, investing every branch of science, but in modern times the expert testimony is produced in open court, directly to the jury, and now that kind of evidence is quite as common as evidence of the actual facts.

It has happened, however, that the practice of admitting opinions in evidence has led to numerous abuses, and excited considerable criticism from the courts and from writers on jurisprudence. Among the evils complained of are the want of satisfactory standards of expertness, with its result of inviting the testimony of charlatans, the partisan, conflicting, and therefore unreliable character of the evidence often produced by so-called expert witnesses, the confusing effect on the jury of the hypothetical method of questioning, and one other point which seems to have been overlooked, the position in which a physician of ability and standing is placed by a bully-ragging lawyer, who attempts to bolster up his side of the case by showing the cross-examined

medical man up as an ignoramus, and contradicting his testimony by that of quacks, charlatans and mountebanks.

The able physician must be on his guard against this wretched prostitution of the truths of science, and prepare to uphold his opinion by fortifying himself with the most efficient, incontrovertible authority. The law does not look with favor upon the introduction of opinions in evidence, but there are circumstances under which such testimony is necessary, the general rule, however, being that persons having technical and peculiar knowledge on certain subjects are allowed to give their opinions when the question involved is such that the jurors are incompetent to draw their own conclusions from the facts without the aid of such evidence.

The test of the admissibility of this kind of evidence is purely, whether the question upon which the evidence is offered is one of science or skill, and it is limited in its extent to the opinion of science or skill. Thus, witnesses skilled in any art or science may be called to say what, in their judgment, would be the result of certain facts submitted to their consideration, but not to give an opinion on things with which a jury may be supposed to be equally well acquainted. In a criminal case they do not give any opinion as to the guilt or innocence of the accused, for that is strictly within the province of the jury.

The questions put to expert witnesses are hypo-

thetical, but the hypothesis upon which they are examined must be based upon facts admitted or established by the main evidence, or which, if controverted, the jury might legitimately find on weighing the evidence. Purely imaginary or abstract questions, assuming facts or theories for which there is no foundation in the evidence, are not admissible. Hence the opinion of a physician in an insurance case that no sane man in a Christian country would commit suicide, not being founded on the science or phenomena of the mind, but rather a theory of morals, religion and future responsibility, is not evidence. Moreover, the opinions of experts are not admissible upon mere abstract questions of science, having no proper relation to the facts upon which the jury is to pass.

As to who is an expert, there has been much controversy, but the consensus of court decisions is to the effect that an expert is one possessing, in regard to a particular subject or department of human activity, knowledge not acquired by ordinary persons, or, as defined by a scientific writer, "an expert is one who can see all sides of a subject."

As to the source of the expert's knowledge, he may derive it from experience or from study and direct mental application. But casual observation and desultory and superficial reading on a subject will not constitute one an expert therein. Thus medical opinions from other than medical men, however well informed the witness may be, are not ad-

missible, but medical men may draw their opinions from books which are a part of their general knowledge and education, although the book themselves will be refused admission in evidence.

It it regarded as an inflexible rule that an expert in one branch of science can not be an expert in another, and the only deviation from this rule is where the sciences are cognate or closely related. An expert in one occupation is competent to testify as an expert in another and analagous one, where the first is such as to give him the opportunity of acquiring superior knowledge and experience in matters of skill and science connected with the other. But the rule will not be so extended as to include a remote and disconnected vocation. Thus, one who is a specialist in any branches of medicine may testify as an expert in other special branches which he does not exclusively practice, all of the specialties being based upon a general course of studies of the same class.

Among the various questions which a physician may be called upon to testify as an expert are the following, which are a summary of the cases in the law reports.

A physician's opinion is competent evidence that an abortion has been accomplished, and as to whether the means employed were mechanical or the administering of drugs, and he may enter into all the matters connected with the procuring of an abortion.

In cases involving the cause of death, physicians may give their opinions of the cause, such opinions being based upon knewledge derved as attending physician, or from examination, or from hypothetical statements, and the rule applies where there are several concurrent causes from which death might have resulted, and he may give it as his opinion that one alone operated to the exclusion of another. Thus, he may say that the proximate cause of death was a wound and not diarrhoea or a surgical operation, or that death came from bruises and laceration, and not from dislocation of the neck, or from drowning and not from suffocation.

A physician was allowed to give his opinion that the deceased died from the effects of poison, although his conclusion was based in part upon information that there was arsenic in the dead person's house. So, a physician's opinion was received as to whether a certain clot of blood produced by injuries could have existed for a specified time without causing death. And the physician who performed an operation may give his opinion that death was the result of gunshot wounds, and not of the operation, and they may give their opinions generally concerning any cause of death.

Whether a still-born child would have been born alive if medical assistance had been received in time is a proper subject of expert evidence.

In case of disease, their etiology or cause, physicians are competent to give their opinions, as, for

instance, among a flood of others, that malaria was brought on by stagnant water, or was responsible for tumors of the brain, or a contagious disease. And they may testify from present symptoms, how long disease has existed; indeed, they may give their opinion as to whether or not the disease from which a patient is suffering is curable.

In an action for damages for exposing one negligently to a contagious disease, physicians were allowed to give opinions upon a hypothetical statement of facts, as to when and where the plaintiff contracted the disease.

In the case of drugs, physicians' opinions are admissible as to the effect on one of a certain quantity of a particular drug. Here is a hypothetical question which the Supreme Court of West Virginia declared to be an eminently proper one, reversing the lower court who excluded it.

"Supposing chloroform, or chloroform and ether mixed, sufficient to procure unconsciousness, to have been administered to a female patient, and on coming to she has charged the physician administering it with having outraged her person: State from your experience and your knowledge as a physician whether such a statement might or might not be the result of hallucination."

The physician will appreciate the above ruling of a court of last resort, because the medical profession is at the mercy of any person concocting or having these "hallucinations." It is not pleasant to

say it, but there are so many cases of a similar character, that a respectable physician who values his reputation will refuse to perform the kind of operation referred to except in the presence of witnesses. Let the wise physician take precaution in every case, for there are those so evil-minded that they would charge the man trying to relieve them of pain and disease of every crime in the calendar, and what is worse, these people can always find an audience to believe their "hallucinations" to be genuine, real facts.

There are many cases where a physician has been allowed to give an opinion as to the proportion of patients who recover from a certain disease, and also as to the effect of a nervous shock, or the result of an accident on the patient's physical and mental condition.

In the case of injuries and wounds, physicians are allowed to give their opinions as experts, concerning causes, but the opinion must be based upon a hypothetical statement; they will not, as a rule, be allowed to give a personal opinion as to the probable cause of a particular wound.

In cases of concussion by being thrown from a car, or a carriage, or by collision of two trains, or being hurled violently forward by the sudden stoppage of a car, physicians are freely admitted to give expert testimony.

A physician is also competent to give his opinion as to the character of instrument by which certain

wounds or injuries were inflicted—whether a club, knife, chair, blunt instrument, crowbar, adze, musket, gunshot, and numberless cases. He may testify as to the size of the bullet inflicting a wound, and as to whether the wound might have been made by some mechanical instrument; the amount of force necessary to inflict certain injuries; whether the wounds were inflicted during life or afterwards; the direction whence came the blow causing the wounds or injuries; the position of the body of the assailant, and the permanence of certain injuries. But in the latter case his opinions must not be speculative or conjectural, and within that rule he is competent to give his opinion as to the natural and probable result of the disease, and the probability, or the reasonable certainty of recovery.

So, also, physicians have been allowed to give their opinions as to the probable consequence of bites on the hand, and of injuries inflicted upon various parts of the body, the permanence of nervous conditions, of injuries to the limbs, thickening of the pleura, and injuries from concussion of the spine; and he may give an opinion that from present indications certain wounds will break out again.

It is proper for a physician to give his opinion in cases of feigned or sham injuries, but he may not testify that a person is a malingerer.

He is also a competent witness upon the question of insanity, and a special study of that subject is not required. Such a witness may state whether in his

opinion a certain person had the "usual and ordinary capacity for the transaction of the business of life," or whether he could comprehend his moral obligations, and his matrimonial duties, though there are some courts where the expert witness regarding insanity must be a specialist on the subject, or at least the attending physician of the alleged insane patient.

But it has been held that such testimony is not admissible as to whether a certain person has a disposing mind and memory and is capable of making a will, though it may be received as to the degree of intelligence possessed by him, and in that case the facts forming the basis of such opinion must be given.

A physician or surgeon may give an opinion as to whether or not another physician has attended skillfully or properly a particular case, or whether an amputation has been skillfully performed. He may give an opinion as to whether a certain infant was prematurely born, and may testify as to the age of a child.

What is the proximate cause of an injury is ordinarily a question for the jury, but the opinion of experts has been received in some instances, as where a physician was allowed to give his opinion that death was due to pneumonia, caused by an assault, or to gunshot wounds and not to a surgical operation. In cases of rape he may give his opinion as to whether there has been such penetration as would constitute rape, and whether pregnancy is

liable to result from the rape, and generally in sexual cases, they may testify as to whether intercourse might have taken place in the manner and under the circumstances described by a witness.

Suffering and pain, however, are not proper subjects of expert testimony, where there are, on the patient's part, clear manifestations of their existence. But a physician may state whether a patient whose limbs have been amputated suffers pain from the lost members, and in a case of asphyxiation a physician was allowed to testify of one who died from it, that the decedent underwent a period of conscious pain and suffering before death, and the rule is the same in cases of personal injury, and in addition, he may give an opinion whether the plaintiff at the trial still suffers pain.

CHAPTER XXII

MEDICAL JURISPRUDENCE

THE foregoing chapters on Privileged Communications and Expert Medical Testimony were deemed a fitting prelude to that now extensive science known as medical jurisprudence, which partakes of the nature of both medicine and law.

It was not until the eighteenth century that this science became recognized as a part of general jurisprudence, innumerable cases in the courts having been found to be impossible of determination or solution without calling in aid the medical fraternity to give opinions which might clear away all doubts, and enable a correct decision to be rendered.

In Europe it was long held that a lawyer should take a sufficient course of medicine to enable him to give scientific opinions upon quasi-medical questions that arise in a given case, or that a physician should study civil jurisprudence sufficiently to enable him to apply his skill and learning to legal questions. The result of these two opinions was the establishment of a new science, that of medical jurisprudence, but physicians, as a rule, are the ex-

pounders of the principles pertaining to it, while the courts retain the jurisdiction to apply them to the matters before them. Hence, this science may be defined to be one which applies the principles and practice of the different branches of medicine to the elucidation of doubtful questions in courts of justice—it is in reality "forensic medicine," or the medicine of the forum or the public.

Treatises on the subject are very voluminous, taking so wide a range that it is difficult to say whether they are medical works or law books, their treatment of special subjects being often circumscribed by medicine or law. It is a branch of medicine with which every physician should become familiar, for it is gradually becoming more and more apparent that the accomplishment of justice is left to the skill and well founded opinions of the physician. In his hands sometimes rest the lives of human beings outside of his regular practice, and vast property interests often depend upon his judgment.

The whole science of medical jurisprudence, briefly stated, is a mere question of evidence, many cases being determined solely by resort to medical knowledge. The medical expert is placed upon the witness stand to state medical facts, and also to express an opinion on the special facts of the case under examination. Thus, he may be questioned as to the health of a particular person whom he has attended; required to give his opinion as to the probable cause of death of a person. He may give an

opinion on medical facts as observed by himself, or on facts observed by other persons and given in evidence. In many cases medical opinions are entitled to great consideration and respect; in others, to very little, as in the case of special reading on a subject where there has been no actual experiment or experience.

Before proceeding farther with this subject, it may be well to digress a moment and speak upon the subject of compensation for expert medical witnesses, other than that paid ordinary witnesses. It is a matter of importance, for physicians are called into requisition in a flood of cases, and they are summoned as witnesses on the slightest provocation. To expect him, as a professional man, to leave his business and employ his talents and skill to give a diagnosis, is equivalent to his employment as a doctor, and his services are professional, demanding a just fee not only as a witness which the law allows every witness, but also a compensation in proportion to his ability to demand a like fee in similar cases.

It is a confusing question in the law books and reports. In general, it is held that a medical expert may be compelled to testify without other compensation than the ordinary per diem allowed all witnesses, especially if he is already on the stand, though he cannot be required to make special preparation for the giving of expert testimony. It is often attempted to convert a physician into an ex-

pert by a general subpoena, and by this subterfuge, deprive him of his just compensation, but this trick may be obviated by the physician himself, if he declare that he lacks the preparation necessary to make him an expert, and in that case, of course, the other side will object him off the stand as not an expert. This method will soon cure the little two by four pettifoggers who are skinning their clients of every dollar they have in the world, of the habit of beating a physician out of his legitimate fees on the pretence of humanity, which is rarely an adjunct in a court room.

In England the distinction is made between a man who sees or knows a fact and is called to prove it in a court of justice, and that of a man who is selected by a party to give his opinion on a matter with which he is peculiarly conversant from the nature of his employment. The former is bound, as a matter of public duty, to speak to a fact which happens to have fallen within his knowledge, for without such testimony the course of justice must be stopped. The latter, however, is under no such obligation, and the party who selects him to testify must pay him.

The rule as to "the duty" is the same in the United States, but the fees of an expert can not usually be allowed and taxed as costs in the litigation. But courts have a way of obviating this rule by ordering in experts when deemed necessary, and in that case an allowance will be made, though not when

he is subpoenaed by either of the parties without an order of the court. In the case of medical experts, that compensation may include loss of time attending upon the case. Generally, the party calling an expert witness is liable for his compensation, but in that case the physician must demand and collect his fees in advance, for he can not collect them by a lawsuit, some of the States holding that an agreement to pay a stipulated sum in case the suit results favorably to the party making the agreement to pay is void for champerty. In some States it is held that there must have been an actual agreement to pay expert fees or they cannot be recovered. But in Illinois it is squarely held that there can be no recovery for extra compensation even in case of an express agreement. In other states statutes provide for the payment of additional compensation to expert witnesses, which must be demanded before attending as a witness, for if he once takes the stand he loses his right to his fees.

The only way to counteract this evident intent of the legislatures and courts at the instigation of interested parties to "beat" physicians out of their legitimate fees, is for every physician to demand a stated fee for his services and exact payment in advance. If an attempt be made to force him to testify, let him remember the saying: "You can lead a horse to water but you can not make him drink." There is no duty or obligation on the part of a physician to testify as an expert, and therefore he may

with a good conscience demand adequate compensation. Medical men of high ethical standing have charged as high as five thousand dollars for an hour or so of testimony, and required payment in advance before going upon the witness stand, and their example in this respect, if in no other, is worth imitating. But to return to the subject of medical jurisprudence.

The range of medical jurisprudence has been extended by the courts to cover nearly every department of medical science, and the probability is that what was once a mere aid to the court of justice will widen its scope until it will eventually include the whole domain of medicine and surgery, including all the possible specialties that may thence be involved. The reason for this is, because the relations between men, their duties and obligations to one another, involve medical questions. We cite only one case to illustrate. In questions of damage for personal injury from accidents, which occupy the greater part of the time of our courts, the doctor is necessary as a witness to testify as to the extent and consequence of an injury, questions which bear potently upon the amount of damage to be recovered. Out of the myriad of these and other cases, the physician is liable to be called upon to testify. It is impossible in a single volume to specify where his services are required, and it will be sufficient to say that the law books and the reports are full of such cases. This being so, a physician's

studies must extend over a wide range to fit him for the duties of a witness, his fees depending upon his ability to solve these questions correctly and justly.

The science of medical jurisprudence covers all the cases of expert medical testimony already mentioned in a previous chapter, and also those arising out of the following conditions:

Sexual Relations—All cases of rape, including the woman's ability to defend herself. The physician has nothing to do with what constitutes a rape, his province being to give the facts resulting from his examination; whether there has been penetration; whether there are semen stains, even a microscopic examination may be necessary to determine whether there are spermatozoa. He also notes marks of venereal disorder, bruises, and marks of violence, rupture of the hymen; whether drugs have been used and their effects, and all the other indications of violence.

Pregnancy—This is a question which physicians are often called upon to determine. The law has decided that there is a difference between what is known as pregnancy and being "quick with child." "Life," says Blackstone, the father of law, "begins, in contemplation of law, as soon as an infant is able to stir in its mother's womb." This difference is important in law and the physician must conform to it. It distinguishes murder from abortion. The legal consequences which flow from life in embryo, and actual life constitute different grades of crime,

and fixes the date when civil rights attach to the child, particularly in questions relating to the succession to an estate. All of the circumstances surrounding pregnancy and delivery are within the scope of medical jurisprudence, and are liable to be involved in civil as well as in criminal cases.

Paternity—This in an important medico-legal question in bastardy cases involving a claim to heirship. Resemblances, similarity of disposition, and all other marks to identify parentage are legitimate matter of inquiry, and come within the scope of a physician's knowledge.

Sexual disability, Sterility, and Impotency, are common in courts where parentage is a question to determine the right to an estate. This involves all the medical questions of malformation, and imperfect development. Physical examinations are generally required and they must always be made by a physician.

Foeticide, or Abortion, and infanticide, with all their circumstances, means of accomplishment, drugs used, and the actual condition of the foetus as to life, whether the child be born dead or alive, are questions of importance which physicians are daily called upon to answer.

Personal identity of the dead and of the living are questions not uncommon, particularly where there have been mutilations which prevent an ordinary witness from identifying the person from well known characteristics. Sometimes, the ques-

tion of identity involves the examination of a skeleton to determine sex, wounds, etc.

Survivorship is a complicated question in many instances. Where two persons meet death in the same disaster, which of them survived? The question of the right to take property by descent is involved in this question, and it requires a high grade of medical knowledge and skill to give satisfactory evidence upon the point. Where the amount of property is large, the medical expert must expect the most strenuous opposition to his credibility and skill, and he will meet with the most disagreeable treatment at the hands of the opposing lawyer. Hence he must come well prepared to sustain his opinions, or he will be put to shame. It is in such cases that he will experience the fine Italian hand of his brother physicians of the sanctified ethical persuasion, who will not hesitate to thrust into him the dagger of hatred, envy, malice, and all the other things which actuate the saints when a very large fee is at stake.

It is for the physician to distinguish feigned from actual diseases, as in the case of soldiers, criminals, and others who wish to excite sympathy, gain assistance by begging, or secure exemption from some disagreeable duty. These persons are termed "malingerers," and physicians are liable to meet them everywhere, but more particularly in the cases

where the various forms of insanity are feigned to excuse the commission of a criminal act. Drunkenness is not an excuse for crime, but dipsomania is regarded as a form of insanity and so also is kleptomania. Degeneracy is sometimes alleged as a defence, and the physician must be well posted to unsnarl the legal and the medical differences. There are even cases where insanity from drugs (knock-out-drops), hypnotism, and idiocy, are set up in an action to dissolve the marriage tie, the parties claiming that advantage was taken of their inability to legally assent to the contract.

Chemical and microscopical tests and examinations are as common as snow flakes in a snow storm, in cases of violent deaths by poisoning, and where blood stains are to be distinguished as human.

Insanity is a large fertile field daily growing wider and more extensive, so much so, that experts are beginning to claim with Lombroso that the whole world has gone crazy. What constitutes it, its exciting and predisposing causes, hereditary influences, and business reverses, anything and everything, are gone into by the courts with a surprising readiness, and to the fullest extent. All the circumstances and causes likely to throw a man off his mental balance, and destroy his responsibility for his acts are carefully inquired into. The subject is practically without limit, and enters largely into every day life in civil as well as in criminal cases.

It is so vast, indeed, that it is essentially a specialty with many physicians, although one in general practice, who studies the question may be admitted as an expert.

CHAPTER XXIII

SUNSHINE AND SHADOW IN A PHYSICIAN'S LIFE

"Care to our coffin adds a nail, no doubt,
And every grin, so merry, draws one out."
—Dr. Walcott. Ode XV.

THE anxiety, solicitude and worry that make up the lives of some people, do not enter into the lives of others at all. The physician's experience is unlike all others. He has unmatched opportunity to study every shade of human nature. As has been written of Eleonore Duse, whose acquaintance with grief has been complete, so may it be written of a physician: "Experience has sharpened his analytic bent so as to put him in touch with every phase of human suffering."

In his confidential relations with patients, the physician learns secrets which vitally affect the lives of others, and his professional manhood is gauged by the faithfulness with which he sacredly guards all confidence. Sunshine, glinting from the record of good deeds, it is the privilege of all to enjoy, but it becomes the physician's duty to mask the short-

comings and errors of his clientele, who shrink from the disclosure of their sins, for the omission and commission of which they may be fully penitent, but to outlive and surmount which they are unable, in many instances, without the kindly help of their trusted physician.

The several members of a household are usually better known to their physician than to one another.

He keeps a watchful eye upon many from the time they enter until they leave the world, and their sunshine and shadows are also his.

He is expected to commiserate and felicitate the youth and maiden, and to soften the misfortune of the husband and wife, heart-broken by the unavoidable visitation of calamity or by the consequence of individual moral frailty.

A too self-sacrificing physician lives almost wholly in the lives of others, sharing their sunshine and shadows and often subordinating troubles and aspirations of his own in their behalf.

Thus doth it appear manifest that the life of no man is like unto that of the disciple of Aesculapius.

It is a fact, however, that as scientific progress is being made, in multifarious ways, a colder philosophy is more predominant, and the devotee of medical science is less frequently called upon to take the time from his exacting duties to perform the offices of a clergyman or a priest.

The sooner the physician recognizes the fact that it is not rightfully incumbent upon him, after he has

formulated laws for the advancement of the health of the whole human race, to act as a perpetual guardian and adviser in matters of sentiment as well as science, the better it will be for his interests.

No doubt there come epochs in the life of every physician when his sympathy can not fail to be aroused by calamity affecting others, and it is proper he should do all in his power to ameliorate the conditions, but there is usually enough of hardship in a physician's life to warrant him in eliminating from his own experiences the troubles of others, at least to as great an extent as possible.

The plan has been recommended of hieing away to some secluded retreat, with no company save that of a dog, where one may be freed from the necessity of listening to chronic tales of woe. A good fishpole and a trout stream often afford relief. Perhaps a gun would be a better protection. The temporary respite thus to be enjoyed, it is said, fortifies the mind for a renewal of the struggle in ministering to the physical infirmities of humanity.

The bete noir of the physician's life is the fact that many people make social occasions howling failures by turning conversation into consultation, and the delight of intellectual interchange into a dismal reincarnation of hideous experience in practice. Whenever the name "doctor" is used in society, there is always some one present who feels a pain or an ache somewhere and wants to consult that unfortunate

individual about it. It would be much safer to call a physician plain "Mr." When people are introduced to a banker they do not start out by trying to borrow money of him, because they know the attempt to be futile, but for some inscrutable reason a "doctor" is regarded as fair game.

Most people do not hesitate thus to consult you on the street, in the cars, at receptions, after church—everywhere—and at all times and under all kinds of circumstances. Of course he must listen or be adjudged a bear. Old Doctor Burns, though, had small patience with such people, and he had an effective manner of curing them that it is a pity all physicians may not use. A lady patient—that is, one who was forever consulting him about her ailments whenever she could corner him, and never pay any fee—received a good lesson that ought to be given all of the same tribe.

Burns was in a terrible hurry one day to make a sick call, when he ran upon the bete noir on a crowded street. He knew it meant a long delay and he was exasperated. So when she blandly buttonholed him and prepared to relate her afflictions from childhood, he sudenly said:

"Shut your eyes and thrust out your tongue, Madam," which she obediently did. The doctor thereupon disappeared in the throng, and when the lady opened her eyes and drew in her tongue, she was amazed to see the crowd that had gathered around her to enjoy the unusual spectacle of a

woman standing with her eyes shut and her tongue hanging out. Of course she was indignant, but she never again bothered the doctor with any more sidewalk clinics.

People who denounce shop talk have no scruples that prevent them from systematically cornering a physician—young or old—at a time when he might enjoy himself and get some diversion from business; and interrogating him with a persistence calculated to drive the victim into a state of collapse from suppressed anger. Doctors die just like other people, but I sometimes wonder whether many of them are not talked to death.

Many venture their own estimate of physicians and medical principles of the various schools, who know scarcely as much about either as the festive porcupine knows about reserved seats in heaven. Into this kind of shadow in the life of the physician, it is impossible to project any rays of sunshine.

It is the misfortune of some physicians who start out in good faith, fired with zeal to benefit humanity, and ambitious to rise to the very top of the profession, that they are surrounded by this environment. A dull, dreary cloud envelops them and depresses their energies, takes away their ambition and drives them to fall into the same custom as the authors of their cloud.

It requires more tact to stop many individuals of good social standing, it may be, when they are gleefully engaged in the attempt to impress the physi-

cian with their knowledge by spouting forth seven-sided chunks of prejudice and "wisdom," than to master successfully the worst forms of disease.

There is one advantage to be gained from the varying sunshine and shadow of professional life, and that is, the privilege afforded the doctor of studying the various vagaries of the human mind, the diversity of human impulses, and of being enabled to shape his own course in life in harmony with all that is admirable and best.

It is not worth while for a physician to reflect the moroseness, and disagreeable qualities of the morbid humanity with whom he is thrown in contact by virtue of his employment. Even if he should imitate his patients in that respect, his idiosyncrasies will be attributed to his own degeneracy, and not to his schooling. It is always thus the world treats its best friends.

A physician who is too self-contained, keeps by himself too much, may, indeed, become morose and pessimistic. This may happen in consequence of enforced seclusion through inadequate financial ability to maintain a social position. The remedy for this, is, as we have said, in making the fees adequate to fill whatever position in society he aspires to occupy. The successful physician is always he who has accumulated a quantum suff. of fees, and has invested his earnings in good paying ventures, so that something is always coming in to keep the wolf from the door. He is never afflicted with

gloom, there is no despair gnawing at his heart, or eating out his noble aspirations. He is optimistic and his optimism bubbles over and affects his patients favorably. If any one says that success is ever based upon anything else than finances—I mean of course, social reclame—he does not know the world, and believes that one can learn to swim without going into the water. Did you ever notice the broad smile of content and affability upon the countenance of the wealthy medico, the high salaried official doctor, as he rashes about in his red devil automobile bowing right and left to his thousand-dollar-fee patients? How did he attain so much success? Why, by compelling everybody but the comembers of his ethical gang to rigidly observe his particular thus-saith-the-Lord-code of ethics on pain of fine or imprisonment, a strangling of competition, so to speak.

Brethren of the bolus and haustus, you have shadows hovering over you always, deep, dark, threatening shadows, but let not that fret your souls, for there is bright sunshine above them in the upper ether, sunshine that you must reach after and impound for yourselves without asking the permission of its would-be monopolizers. Yo do not have to wait until some friend of humanity writes on the whitewashed head-board thrust into the ground to mark your pauper's grave, "Well done, thou good and faithful servant." You are free to go ahead and provide for a glittering marble shaft, or a massive

mausoleum to mark your last resting place, by following your own code of ethics, fearlessly, honestly, and in a business-like manner. You belong to one of the learned professions that asks no odds from any, needs no apology, and creates out of itself its own code of broad and liberal morality. "Laugh, and the world laughs with you; weep, and you weep alone."

CHAPTER XXIV

THE DOCTOR IN POLITICS

"The man of medicine can in worth with many warriors vie,
Who knows the weapons to excise, and soothing salves apply."

—The Odyssey.

THE physician is advised to "go into politics" for the purpose of thereby widening his sphere of influence and his power to make his profession occupy a prominent place. This advice is in direct opposition to the old ethical rule which requires the physician to abstain from pushing his way to the front, and submerges him in a sea of obscurity whence he must not emerge unless particularly called upon. As absurd and ridiculous a condition as that of the boy whose mother threatened him with dire punishment if he dared to go into the water before he knew how to swim. How can a doctor move toward the front if he remain stationary in the background? Politics is one of the desirable ways of hewing out a career in the medical, as in any other profession; moreover, it is perfectly

proper and legitimate, and a duty. Here are the reasons:

Public Health is one of the most serious and important questions that modern society is engaged in solving. Individualities are becoming farther removed from the "family doctor" idea of medical treatment by the congestion of population in cities and districts which imperatively demand sanitary conditions in general, cleaner and less disease breeding environments. The object of this general onslaught upon unsanitary conditions is not unreasonable; on the contrary, it logically tends toward healthier, more robust and more vigorous individuality.

Now the Federal authorities, States, and the lesser governing powers, have taken charge of this general sanitary movement, upon the constitutional ground that whatever pertains to the public welfare must be controlled by the public according to a uniform system, and not left to the vagaries, whims and caprices of segregated individual effort. Hence we have City, County, State, and even Federal Boards of Health vested by law with a general supervision of minor sanitary boards who in turn control public institutions, the army, navy, militia, jails, penitentiaries, police stations, hospitals, asylums, almshouses, pest houses, and a legion of other institutions requiring the aid, assistance, co-operation and employment of a great army of physicians. To become attached to any of these institutions is a

laudable ambition on the part of a physician, and that this is so is abundantly demonstrated by the fact that even the most bigoted observers of the old, moribund system of ethics move heaven and earth to get into these controlling boards and minor positions, and if they, the guardians, exemplars, defenders and interpreters of the "ethical" system, do not scruple to engage in the most scandalous quarrels to overreach one another in gaining a good fat job, how can any one condemn a physician who casts overboard the pernicious, villainous system of the old ethical school, and gains precedence for himself by cleaner, decenter, and more professional methods?

There is no way under heaven of making any impression upon any of these public avenues for the exploitation of the medical profession except through politics, and politics alone. The self-constituted guardians of professional sanctity may rave against a physician going into politics until they are dumb, without disturbing the even, all-pervading current of political influence which alone can foist a physician into a position of prominence and honor, where he can employ his talents for the public welfare. And it should be known to the youngest and most unsophisticated medical student who leaves his Alma Mater with "keep out of politics" dinned into his ears, that the bland "professor" who thus misleads him, is himself "in politics" neck deep for the grabbing of lucrative positions, and

erects this bugbear of medical ethics as an impasse to any competition that may possibly compel him to let go his clutch upon public pap. To break up this stupendous "ring" growing out of effete medical ethics, and to put himself in a position to "do as the monk does," the writer again says to the medical profession: "Go into politics." And this thing of politics must be wooed as gently as a suckling dove, it can not be forced nor broken into by a surgical operation. Here is the modus operandi furnished the writer by an old politician of experience.

The whole country from the National Capital down to the justice of the peace "deestrick" of Mud Creek, is run by politics and nothing but politics, and political influence. Civil service is a mere gag upon the noisy mouths of so-called reformers out of a job and trying to get one. Every precinct or voting district has a small organization of one or the other of the dominant political parties, and also of the various reform aggregations looking to secure the balance of voting power. Up from the precincts grow the ward clubs, which are of importance in the election of aldermen, constables, and other minor officials. Then comes the City club or association, each party has one. Still further above and surrounding the City clubs are the County organizations, which are stronger than the others below, and exercise a controlling influence. Above and beyond the County organizations are the State

political organizations, which wield a controlling influence co-extensive with the State lines. Out of the State organizations spring the National Organization or Committee which rules the entire Nation.

To make this clearer: the precincts combine to create the ward clubs; the latter unite to form from their picked members the City or County organizations. The members of the County organizations select from their members the State organizations, and the latter elect a certain one of their number to be a National Committeeman. All of these organizations mean something, they are the controlling forces that say to a certain man, you shall have the position of constable in the 45th precinct of the 75th ward; alderman from the 20th ward, Mayor of the City of Podunk, a County Commissioner, or member of the Board of Health; Governor of the State, or President of the United States. They control, dictate and influence the election or appointment to public positions of every man and woman who fill the more than a million public positions in the land. Wherever there is a position of profit and honor, or profit alone, these political bodies are there to have a finger in the pie. They are the American institutions, they constitute its government, dictate its policies, indeed, they are the people, and without them this country would cease to be a people's government.

From this mere outline the reader may perceive,

that to remain aloof from these institutions is to fail to avail himself of his rights as an American citizen, to neglect his duties as such, and to be a foreigner, a useless "looker on in Venice." But no man can get into this massive coherent, consistent ring from the top; the bottom is the only place at which to find an entrance, and getting in there means gradually working up to the top over the various stepping stones.

Wherefore, let the physician take an interest in his government, be a public spirited citizen. He goes to the polls to register his name, age, occupation and address, for the purpose of voting. That done, the doctor is known in his precinct by every "captain, lieutenant, judge, clerk and candidate;" his name is printed and scattered to the four winds of heaven. Business men procure these lists and send him circulars; the lists spread to every manufacturing center in the country, he is a fixed element with a local habitation and a name, and his mail list increases, nobody knows why or how, for the people generally outside of the politicians are not aware of the facts here divulged.

By and by the doctor expresses a cautious opinion, begins to take sides, talks for this or that candidate, he doesn't talk against any one, for that would not be good policy. This brings him into a little notice, a small crowd gathers around him to listen, for, being a doctor, as everybody knows from an inspection of the general registry of votes,

he is regarded as a man of intelligence able to express a decent opinion. In a little while the ward club sends him a polite invitation to join. This he should accept, attending a meeting once a month or so, saying a few good words to everybody; perhaps he rises to his feet and makes some general remarks about the sanitary needs of the ward. They listen, and before the doctor knows it, he is being consulted about suggested improvements.

Thence on, it is possible for the doctor to advance as far in the political scale as any other citizen, and at the same time, either retain his "jogging" practice, or exchange it for the higher order of medical practice involved in sanitary legislation. The field is a large one and constantly increasing. To throw himself with ardor into this pursuit, or let us call it "specialty," will not only not hamper him in his profession, but will enable him to attain the very highest scientific attainments. It is at the present time the essence, the summum bonum of the medical practice, and it is more far-reaching in its benefits to humanity than any humdrum routine of private practice can ever hope to be. There is the water supply, the garbage problem, lodging houses, abattoirs, food inspection, dairies, cemeteries, climatology, sanitariums, clothing, epidemics, and contagious diseases, and other questions of sanitation and hygiene, which are assuming gigantic proportions as public questions that imperatively demand solution. All this in addition to the medical control of public institutions.

There is nobody better grounded in matters pertaining to these questions, nobody better equipped for managing them. Indeed, it is to physicians that the laws leave the control of such public matters. The physician's education is along sanitary and hygienic lines, and he is always building up on that foundation. He knows what legislation is needed, and how to make that legislation operative. Indeed, there is scarcely a statute with reference to the public welfare that does not contemplate the employment of medical knowledge. Hence it is urged upon the medical profession to enter into politics with these laudable objects in view. It is a plain duty, moreover, for if he abstains by remaining in the background, and permits the ill-advised and the uninstructed to inaugurate sanitary and health measures, waiting to be called upon, the result will be a bungling legislation and its inefficient execution.

There is this further to be said about doctors and politics. The medical man knows human nature and its needs more, perhaps, than any other class of men. He is in daily contact with their good and bad sides, is daily employed in making their crooked paths straight, and keeping their straght paths from becoming crooked. He knows better what are the minds of men than men themselves do, and knowing this, it is within his capacity, as well as his province, to provide for their wants. The way is open for him through our system of politics, and

all he has to do is to begin at the bottom rung of the ladder and climb up. In the community in which he practices, however small, he is a marked man, one who lives in a glass house to be seen of all men. He is a man deferred to, appealed to, and regarded as an authority, not only so far as health is concerned, but upon public matters. Such a man can not fail to be right on public matters, and to expect him to keep his hands off politics, as some monopolizing guardians of the public morals and patronage would have him, is to ratify the selection of incompetent men for public positions, and the continuation of corrupt, grating political influence with its train of wretched government.

CHAPTER XXV

HOW TO INVEST MONEY

A PHYSICIAN should never forget that success begets success, and that the main road to it is prosperity. So the world goes, and doctors are part of the world, and an essential part. It is quite true that "Rank is but the guinea's stamp," and another trite saying is "Clothes do not make the man." Like all sayings and proverbs that emanate from pessimistic sources, from the man who stops at the bottom of the ladder, or in the ditch, they are unphilosophical. Modern customs are based upon such sharp competition, that no man wins unless he succeeds. Place before the multitude the opinion of a Diogenes living in a tub and that of a modern banker dwelling in a palace: Diogenes would be considered a fool to the other. Why? because the philosopher has nothing in the way of influence to back his opinions, whereas the banker has the security to guarantee his.

Money alone does not beget success except in accumulating more money, which, it will not be disputed, is not a success so far as manhood is concerned, but when worth, ability, merit, and skill are

combined with money, it goes without saying that money enables the ability, etc., to reach the topmost rung of the ladder. Wherefore, then, to make one's abilities apparent and available, when a man feels within himself powers that could be exercised for good, and be spread over a larger sphere of action by means of it, the acquisition of money becomes a matter of duty. Let every physician metaphorically ask a wealthy brother, who, having reached the summit of his ambition, is disposed to keep his fellows down to a rigid observance of the ethical rule not to aspire to make money, whether he be willing to give up his accumulated fortune and begin over again so that he may practice what he preaches? The only answer he will find is contained in the expressive slang, "Not on yer life!"

It must be conceded that money and the possession of a certain amount of wealth adds to the influence of a physician; such mundane things are his best advocates, and the more he accumulates, the greater will be the fees he may charge, and the more readily will they be paid. It is a curious feature of humanity: when a man is in need of anything, he finds difficulty in getting it, but when he is in need of nothing and the world knows it, things are flung at him with a surprising open-handedness.

Let us therefore make money, in a proper and legitimate manner, however, and for the purposes specified all through this book, to-wit: To be in a position to aid humanity in a more satisfactory

manner. There are no business laws more especially adapted to a physician than to other men, they are the same in all cases, and a physician must conform to them like other men. If he can not, or neglects to do so, then he becomes a mere life long plodder, keeping body and soul together with the pittances flung at him regretfully, and his power to do good is narrowed to an extremely thin line.

But how to make money is the burning question of the age. Many succeed, many fail, indeed, men who follow in the beaten track of those who do make money, fail ignobly, why, nobody can tell. It is conceded by every man who has tried it, that it is almost impossible to attain competency through ordinary wages, or fees per se. By careful economy and strict contraction of expenses some, even many, have succeeded in acquiring a home, and enough for a moderate funeral with a little surplus, but in such cases it must be confessed, that the entire life struggle is concentrated upon the securing of a home, which detracts from the acquirement of the skill required to earn the fees which go into it—it is unnerving—it becomes a mania. Fees may be so manipulated as to bring their owner larger returns than can be obtained through the small interest allowed by savings banks, or procurable on real estate mortgages, yet these are, perhaps, the safest and best investments a doctor can make. Money lending on the collateral security of personal property is altogether too uncertain, and takes up all

of one's time eventually. It is a good and lucrative business for a banker or pawnbroker with large capital, whose risks justify him in exacting a high rate of interest.

Some have done well by investing in real estate and holding it for a "rise," and then selling out, or selling one-half to pay for the whole, leaving the other half net to the good. There is always a lot or plot here and there to be picked up; a small down payment secures it, and perhaps before another deferred payment becomes due, somebody comes along who wants it, and will pay a handsome bonus for your contract. Then you can be on the look-out for another chance; perhaps, if your capital will justify it, you may take advantage of several chances. There is some risk, of course, for failure to meet deferred payments means a foreclosure, and failure to redeem from it means a loss of all the capital invested, and failure to secure a buyer means no sale, loss of interest, expense of taxes and assessments, and perhaps a slump in price. Unimproved or unproductive real estate often imposes a heavy burden—a liability instead of an asset.

Make no permanent investments in vacant realty, for like a horse for which you have no use, it soon "eats its head off." It is well enough to buy a piece of good vacant property for a quick turn quite certain to be made, or for improvement, but it is a safe rule to invest permanently only in improved realty that will produce an income sufficient to cover taxes,

insurance, assessments, and a fair rate of interest on the investment. This coupled with a good prospect of a steady rise in value makes real estate one of the safest and best investments for medical men. Besides, being known as a property owner adds to his standing as a professional man and as a citizen.

There are speculations and legitimate investments for any sum of money however small, and it is very difficult to draw the line between what is speculation and what is legitimate. Boards of Exchange and Stock Exchanges that deal in futures of grain and other products, and in corporation stocks and other species of property that rise or fall in value in proportion to the demand for them, are legitimate in the eye of the statute law, through often as dangerous and as demoralizing as common gambling in results. To go into this species of investment is extremely hazardous, and nine times out of ten, results in a total loss of every dollar invested, for the chances are very much against you all the time, unless you devote your entire time to watching the stock market, which a physician can not do and should not do. He must leave everything to his broker, who is often a "plunger" and who drags his customers down with him into a common huin. It is always a safe policy in all money matters to control your cash yourself. Money is slippery and easier to lose than to gain.

The illegitimate and always to be condemned sort of investment or way of making money is "gam-

bling" as it is commonly called. It is restricted now to the roulette wheel, and card games such as poker, faro, baccarat, bridge whist, etc., most of which are prohibited by statute law, but continue to be played nevertheless with unabated enthusiasm. The physician who enters society, or attends social reunions of any sort outside a strictly church or Sunday school gathering, is generally confronted with the expressed wish of his host that he "take a hand." Of course this is far from the idea of gambling as a business, which is always deplorable, and should never be accepted as a means of adding to one's finances, for professional gamesters confess that the chances are always against the player. But a friendly game with a trifle of money up, which the players are expected to lose to the host for the purpose of enabling him to pay the expenses of the entertainment, the physician may not find to his disadvantage as a social amusement, although, if he develop the passion of gaming, he must stop as short as the dipsomaniac at the sight of a glass of his favorite tipple. There are many very reputable physicians who do not deem it dishonorable to play poker to gain enough to meet their daily expenses, thus leaving their fees net for more secure investments. The physician who accepts the new code of ethics contemplated in this book, should avoid all such examples as pernicious, and treat them as far worse than the most lurid advertising.

Industrial stocks in sound companies are good

investments, for more can be realized upon them than upon any others. Their tendency is always upward, except when great syndicates are engaged in a war with one another for control; then it is well to keep out. Railroad stocks that do not have a habit of fluctuating "wildly" are good investments, and government bonds including those of municipalities are safe, and the income from interest small, though sure, repudiation not being favored by our laws and courts. In making investments of this kind, it is wise to think more of the safety of the principal than of the higher rate of interest promised where both may be lost.

One good and commendable investment is the organizing of an industrial or manufacturing company upon a patent or improved device of any kind in popular demand. This does not require much cash capital, for a trifle less than one-half of the capital stock may be put upon the market and the proceeds devoted to development and manufacture, the other half being retained as the parent of dividends. Whatever there is a demand for is a good business to invest in, and the greater the demand the greater the profit.

There is a flood of mining and oil stocks constantly in the market, and of these the man with a small capital must be exceedingly wary. Some of them offer the most brilliant returns on a small outlay. Fortunes are offered in glittering prospectuses published in the Medical journals, Religious news-

papers, and in the daily press, or mailed directly to the physician who is considered a splendid and easy "mark" for the promoters of these companies, not all of which are fakes, but most of them are not what they should be to justify investing in their stock with safety. The stocks in the best mining and oil companies are not thrown upon the public or hawked about for a song; they are difficult to get. Ask your banker or a millionaire friend if you have one, how much money he would be willing to put into the stocks of a certain concern with which his name is not connected, and if he laughs, you laugh also and keep your money for something less doubtful.

There is a class of concerns which every one should avoid as the pest. They are given various names: "Get-rich-quick-companies," blind pools or "investment companies." They offer all the way up to ten per centum a month on the money put into their hands, sometimes more. They are all frauds on their face, for there is no investment in the world that can possibly realize ten per cent per month upon the money invested. If that could possibly be, do you not think your own banker would go into them instead of being satisfied with the current rate of interest? Yet money pours into the coffers of these frauds, and there are actually people who hoot at you as an ignorant business man if you venture to warn them against dropping their hard earned money into a bottomless bag. This is their

modus operandi: They take your money and invest it as they deem proper, in anything they choose; you give it to them. This is the "blind pool" part of it, for the investor is kept in the dark as to the nature of the investment, which may be in a poker game for all he knows. Then, to show you how honest they are, and how much those who warn against them lie, they pay you an agreed monthly dividend for from one to six months, until they have secured "suckers" to the amount of a million or two of dollars, and then they stop, ahead half a million or so; their beautifully furnished offices are closed, or else "This place has changed hands" appears in big letters on the door. You are out, at least if you are lucky, only one-half of your investment. In some cases, these "benefactors" are caught and jailed, but in the majority of instances they are too slippery to be caught. Like the festive flea, when you put your finger on him he isn't there. Often they turn up under different names, in a different locality, and resume their plundering boldly.

There are numerous small investments which usually turn out most profitable. Some friend may desire a few hundred dollars to exploit a safe, lucrative business with which he is familiar. He has the ability, you have the capital which he has not, and, knowing him to be honest you join the two. Very large and exceedingly profitable operations have grown out of such modest beginnings, and the rewards are often much greater than in numerous

other lines of investments; moreover, they are something over which you can exercise control at every stage, and to control your investment is to make its return sure.

The writer believes he has given his readers a fairly good outline of the various means and methods of investing money, but he wishes to add, that it is much easier to get rid of money than to earn it. Every man's hand seems to be stretched out to seize your money and when you reach out for a supply pockets seem to be buttoned up tight. It is always safer to take the advice of some disinterested friend on the subject of investing your money in any given case, and to invest in something rather than let money lie idle, for if you leave it in bank, the latter may use it to realize a large income from it without sharing with you to the extent of a single red cent. The law is that money deposited in bank generally belongs to the bank to do with as it deems proper and expedient. It is no longer yours, what is left you is a mere liability on the part of the bank to repay you an equal amount if it can, which does not always happen.

What has been said in this chapter, has been said for the purpose of putting the physician au fait in general financial matters for the sake of his patients as well as for his own. The doctor is often consulted by his patients about money matters, and he should put himself in possession of all the information possible to be able to give lucid answers. He

is a man who is considered as being posted upon every subject, and it requires very little study and observation to maintain his reputation in that respect. This brings him reclame in his profession, and enhances his practice by giving him prestige. The very name "doctor" means a sage, a wise man —Doctus homo sapiens est.

CHAPTER XXVI

EPITOME OF THE LAWS OF BUSINESS

"Be ye therefore wise as serpents, and as harmless as doves."

—Matthew x. 16.

IT is deemed appropriate to include in this book an epitome or resume of the general laws of business which apply to a physician in common with the rest of the population. They are the outlines of laws reduced to aphorisms or epigrams, to do otherwise would require a large volume.

They may be of some help to the practitioner in his various business and social relations with patients and the people of the world at large, and they may be considered as correct. It should be noted, however, that the laws of the various States are not entirely uniform on the subject of either business or criminal laws, but whatever variations exist are so slight that they may be easily ascertained in the localities where the reader resides.

Added are brief points of general criminal laws, questions concerning which are constantly arising in a physician's practice.

Ignorance of the law excuses nobody.

It is a fraud to conceal a fraud.

The law compels nobody to perform impossibilities.

An agreement without consideration is void.

Signatures made with a lead pencil are good in law.

A written receipt is not conclusive evidence of the payment of money.

The act of one partner binds all the others.

A contract made with a minor can not be enforced against him, but a note made by a minor is voidable —he may choose to ratify it after he attains his majority.

A contract made with a person non compos mentis is void.

A contract made on Sunday is void.

Principals are responsible for the acts of their agents.

Agents are liable to their principals for errors.

Every individual in a partnership is liable for the whole of the firm debts.

A note which does not state on its face that it bears interest will bear interest only from maturity.

A lease of real property for more than a year is void if not in writing.

Promissory notes procured by fraud, or made by an intoxicated person, are not collectible.

If no time of payment is specified in a promissory note, it is payable on demand.

An indorser of a promissory note may avoid liability by writing "without recourse" above his signature.

A check indorsed by the payee is evidence of payment in the drawer's hands.

An outlawed debt in some States is revived by a partial payment, in other States an entirely new promise must be made in writing.

Want of consideration is a good defense between the original parties to a promissory note; but after it has been transferred before maturity to an innocent holder for value it is not a good defense, neither is it if the note has been transferred after maturity.

Negotiable paper, payable to bearer, or indorsed in blank, which has been stolen or lost, can not be collected by the thief or finder, but a holder who receives it from him in good faith before maturity, for value, can hold it against the owner's claims at the time it was lost.

If negotiable paper, pledged to a bank as security for the payment of a loan or debt, falls due, and the bank fails to demand payment and have it protested when dishonored, the bank is liable to the owner for the full amount of the paper.

Every contract must be for a valuable consideration, either money, property, service to be given, or injury to be endured. A promise to marry is a valuable consideration, so also are consanguinity, love and affection.

Courts construe contracts according to the law prevailing at the place where the contract is made.

A promise to pay the debt of a third party must be in writing, or it is of no effect.

The terms of a written contract can not be altered by evidence of a different agreement made prior to its date, but it may be changed after its date by altering or amending its terms.

In computing the time which a contract has to run the first day is omitted and the last day included.

If a man choose to pay a promissory note before it is due, he must take the note up and cancel it, otherwise, should it come into the possession of an innocent holder for value, the maker would have to pay it over again.

The indorser of a note is responsible if the maker fails to pay it when due.

When a man signs a note with another, and at the same time, he is a joint maker and liable to pay originally.

A person who lends his name as a partner, or who suffers his name to continue in the firm after he has actually ceased to be a partner thereof is still responsible to third persons as a partner.

The individual note of a single partner binds the firm if such paper appear on its face to be on partnership account.

Death dissolves a partnership. So also does the sale of one of the partner's interest in the firm.

When a man enters an old established partnership he becomes liable for the old debts as well as for the new ones.

As a general rule, no man can authorize another man to do what he can not do himself.

Leases for one year or less need not be in writing.

Leases of over three years must be recorded.

If there is no agreement as to time in renting property, the tenant as a rule holds from year to year.

A tenancy at will may be terminated by giving the tenant one month's notice in writing to quit.

A married woman can not lease her property unless the statutes expressly give her the right to do so.

A husband can not make a lease which will bind the wife's property after his death.

A new lease renders void a former one.

A tenant may underlet the property unless forbidden by the lease.

A lease on mortgaged property terminates when the mortgage is foreclosed if the mortgage was made prior to the lease.

A tenant who assigns his lease even with his landlord's consent, remains liable for the rent. A tenant who rents by the month is entitled to thirty days' notice of surrender of the premises.

A landlord can not be compelled to make repairs or do anything not expressly specified in the lease.

In buying real estate look out for liens of mort-

gages and contractors, and generally, mechanics' liens. In the case of personal property, be sure there are no chattel mortgages on it. The records will show the facts in both cases.

A deed from a married woman should be joined in by her husband.

A bill of sale in some of the States must be acknowledged before a notary public when made by a married woman. A deed directly by a man to his wife does not cut off prior obligations. It must be deeded through a third party.

All mortgages and deeds given with intent to defraud creditors are void.

Generally, a chattel mortgage running more than a year is void against third parties. A chattel mortgage can only exist where the debt secured by it is also valid.

A chattel mortgage must be recorded.

A chattel mortgage on a shifting stock of goods is usually void.

Whatever is the subject of ownership may be assigned.

An assignment of a debt carries with it all the collateral securities and guaranties of the original debt, even though they are not mentioned in the assignment.

Every description of property, whether real or personal, may be given by will.

Property may be bequeathed by will to all per-

sons, including married women, infants, lunatics, idiots, etc.

Any person competent to make a valid contract may make a will. Every State has special laws on this subject, however.

All wills must be in writing subscribed by the testator, in the presence of two, sometimes three witnesses, and acknowledged by him as his signature, and the witnesses must sign the will in the presence of the testator and in the presence of each other. Soldiers in actual service, and sailors at sea may make a verbal, or "nuncupative" will, the mode of making which is prescribed by the statutes of the several States. In some States anybody may make a will of personal property verbally, and some States also permit wills of personal property to be made by an informal writing. The best rule is to put it in writing with witnesses, and then there can be no future controversy concerning it.

A new will revokes all former ones.

Some corporations can not receive property by will.

Shares of stock in a corporation are supposed to represent the value of the property of that corporation, but they rarely do.

Stock certificates are transferable from hand to hand like bank notes.

In some States a stockholder in a corporation is liable in double the amount of stock subscribed by

him. This liability attaches to all holders of stock whose names appear upon the corporation books.

Common stock is entitled to whatever dividend it can get. Preferred stock is entitled to a certain fixed dividend.

Bonds are really promissory notes, the obligations of a corporation, State, county, or city. The bond of a company may be a perfectly safe investment, when the stock is practically worthless, and the stock of a prosperous corporation, paying large dividends, or having a large surplus, may sell at a higher price than the bonds of the same company, the income from which is limited to the rate of interest specified in the bond. A much closer scrutiny should be made of the company's standing when a man wishes to invest in its stock than when he intends to loan money on its mortgage bonds. There is no security for the payment of the face of any other value of the stock, but the bonds are secured by mortgage on the actual property, and when the mortgage is foreclosed the stockholders are "frozen" out, but are still liable to pay the face value of the stock held by them.

Bonds with interest coupons are payable to the holder; where without interest coupons, the interest is payable only to him in whose name they are registered on the books of the corporation. Convertible bonds are exchangeable for stock, lands, or other property.

CHAPTER XXVII

CRIMINAL LAW

THE offense can not be condoned by receiving back the stolen property.

The exemption of females from arrest applies only to civil and not to criminal cases.

A man is not at liberty to do indirectly what he can not lawfully do directly.

Every man is bound to obey the call of a sheriff for assistance in making an arrest.

When a man is accused of a crime, the rule that "Every man's house is his castle" does not apply.

Embezzlement may be committed only by a clerk, or servant, or the officer or agent of a corporation.

Grand larceny is where the value of the stolen property exceeds $25. When less is stolen, it is petty larceny.

Arson in the first degree must be committed at night, and the buildings fired must have been inhabited.

Drunkenness is not a legal excuse for crime, but dipsomania, or delirium tremens, is considered insanity.

An "assault" is an offer or an attempt to strike another. Battery is actual violence.

Mayhem applies to any disabling injury done on a limb, or to the face, lip, tongue, eye, ear, etc.

A felony is a crime punishable by imprisonment in a penitentiary.

A police officer is not authorized to make an arrest without a warrant unless he has personal knowledge of the offense for which the arrest is made.

No man is obliged to answer questions when the answers will tend to criminate him.

An accident is never a crime, unless criminal carelessness can be proven. A man shooting at a deer and killing a man is not a murderer.

Burglary in the first degree can only be committed in the night time.

Murder, to be in the first degree, must be willful, premeditated and malicious, or committed while the murderer is engaged in a felonious act.

False swearing is perjury, when committed in court or in court proceedings in and about something material to the case on trial, and in swearing falsely to instruments to which the law has attached the crime of perjury if falsely sworn to. If the person swearing uses qualifying statements, such as: "to the best of my belief," "as I am informed," this may save a statement from being perjury. The law is that the false statement must be absolute. Subornation of perjury, or inducing another to

commit perjury, is a felony. Sworn affidavits of newspaper circulation, cures by patent medicine and the thousand and one uses to which affidavits are put are mere wind, and do not constitute a foundation for perjury, even if entirely false. They are intended to catch the public. When a man is too liberal in the use of affidavits his credibility is open to suspicion.

CHAPTER XXVIII

GO NOT TO LAW

"Now, therefore, there is utterly a fault among you, because ye go to law one with another. Why do ye not rather take wrong? Why do ye not rather suffer yourselves to be defrauded?" I Cor. vi. 7.

SEVERAL fundamental principles should be taken into consideration as regards the laws governing proceedings against physicians for nonfeasance and malfeasance—the first, the omission of duty (neglect); the second, palpable offense—the attempt to treat disease or to operate without the necessary skill.

There appear occasionally in the sea of professional life, a Scylla and Charybdis, which involve the wrecking of reputations and hopes, but if the rule be observed by the qualified, never to neglect a case in any particular, legal questions are not likely to arise. The term "negligence" is limited in its application to carelessness in the performance of professional duty. Duties performed without care, caution, attention, diligence, skill, prudence or judgment, are negligently performed.

No one is exempt from liability to become involved in a civil action, which may be brought by designing people, who seek to assassinate personal character, and, at the same time, line their pockets with ill-gotten gain. A doctor always has many unscrupulous enemies, even in his own profession. Envy and jealousy are the mainsprings of many actions brought against physicians, and equally unscrupulous witnesses may always be had for the hire to prove anything. Trumped-up cases to gratify revenge, for black mail, those growing out of spite and malice, and to interfere with a brother physician's prosperity and reputation are to be expected, and are common stock.

The only stand to take under such circumstances is that of uncompromising defence, one of fight to a finish. To show the white feather is to invite and encourage the unscrupulous to continue their pernicious work of attempting your destruction.

It is seldom advisable to sue for fees. When a professional man, particularly a physician, sues to recover some adequate compensation for his hard-earned labor, he is generally met by some pettifogging attorney, or scalawag doctor, ready to sell his birthright for a mess of pottage, who proceed to tear his reputation and ability to tatters, and put him in the position of an ignoramus, an unskilled quack, a charlatan, and what not, for the deliberate purpose of beating him out of a few dollars of fees; many will even incur an expense ten times greater

than the doctor's bill for the mere satisfaction of cheating him out of it altogether, or of injuring his reputation and ability to do good.

In the majority of cases, the doctor who sues, gets beat, or recovers a judgment against an execution proof patient. The advice of the writer is, "don't sue," get your fees in advance, or take some security that they will be paid. Take your patient's note if he is financially responsible, say at sixty or ninety days and negotiate it; that is, indorse it over to a third party. The law of the commercial world is that against an innocent transferee, or indorsee, or holder of a promissory note, the maker cannot set up failure of consideration, or plead malpractice as a defense to its payment, although he may do so in the hands of the original payee. Queer rule, is it not? A man may beat a doctor out of his fees by law, but not a man who is not a doctor, or one who had nothing to do with the case.

Paracelsus once cured a very rich cleric so speedily that the priest refused to pay the demanded fee because the services rendered were so short that they were not worth anything. Paracelsus, accordingly, sued, but the upholders of the medical ethics of the period persuaded the judge to throw his case out of court because he had violated the professional code of medical ethics by curing the patient instanter instead of dragging the treatment along for a long period. The plaintiff became very angry and berated his antagonists with so much vigor

and in such strong lauguage that he was compelled to fly to escape assassination. He had his revenge afterward, for he returned to Basel, and at his very first lecture, he lighted some sulphur in a chafing dish and burned up the books of his great ethical opponents, saying: "Sic vos ardebitis in gehennâ." (So you shall burn in hell).

The writer's attention has been called to a case that happened in a neighboring city. A prominent skilled surgeon had performed an amputation upon a patient well able to pay, but who refused to pay after the services had been performed and he had entirely recovered. The surgeon sued to recover his fee, but he was defeated, for, on the trial, witnesses, and expert medical ones at that, were brought in to testify that the amputation was a dreadful case of malpractice, in that the leg had been cut square off without leaving any "flap," just as one might cut off a shank of beef, and that a new operation had to be performed to save the patient's life. Of course it was not true, but the preponderance of evidence was against him, and he lost. It is this preponderance of evidence and not the truth which is the general rule in courts of justice. In this case the surgeon not only lost his reputation, but his practice, but ethics were maintained.

It is for these and many reasons that a physician should think twice before hazarding his reputation, and perhaps wrecking his whole life, by appealing

to the courts for any redress. His only safe, sure method is to demand an advance fee or security for the same, or limit his practice to those persons who have some regard for honor and common honesty. There is no principle in the law of justice or humanity which makes it his duty to sacrifice himself, any more than there is for a clergyman, lawyer, druggist, or undertaker, or a public official selected to perform a certain duty, who refuses to perform that duty without compensation.

CHAPTER XXIX

VALE!

THE professional doctrines of Descartes, Herbert Spencer and others are the doctrines of the educated and trained physician of today:

"First in importance to the individual is that knowledge which is necessary to self-preservation."

"If it be possible to perfect mankind, the means for so doing will be found in medical science."

"Medicine is one of the greatest divisions of human culture."

"The student of medicine is the best suited to the development of the intellectual life."

The loftier sentiments which inspire physicians of the best motives and attainments, should be cultivated by all in the profession, but the importance of the practical rules of diplomacy, which render a physician's career a success or a failure, from a purely secular standpoint—that which concerns not only the physician himself but all those dependent upon him—according as they are interpreted and personally adapted in practice, must not be lost

sight of by those who aim not only to succeed professionally, but also to possess and to share with those near and dear to them the full fruitage of their life's labor.

Bear in mind the scriptural injunction relative to "casting bread upon the waters," and do not fail to make this deduction, that, "in seeking others' good, we find our own."

Let us no longer follow the practice in ancient Egypt, or regard the solemn owlish warnings of the mysterious "vates," or listen to the treacherous admonitions of the Roman Augurs who laughed in their hoods at the simplicity of their devotees. Let us rather venture out upon the ocean of modern progress and medical adaptability to the wants of the people of the earth. This is the true rule of modern ethics, the only safe one to be followed by the profession to make his skill and ability of value to suffering humanity.

Edward Berdoe in "Origin and Growth of the Healing Art," says:

"The principle of authority was paramount in Egyptian medicine. So long as the doctor faithfully followed the instructions of the ancient exponents of his art, he could do as he liked with his patient; but if he struck out a path for himself and his patient unhappily died, he forfeited his own life. It was the absurd reverence for authority that prevented any real progress, kept back, by fixed regulations, the freedom of the medicinal art, re-

stricted it on every side. Had it not been for this, Egyptian medicine would have made immense advance."

And now, brethren of the medical profession: VALE! Be yourselves always; keep your lamps well trimmed and brightly burning; never permit a sudden inspiration of new treatment, a flash of common sense methods, to be smothered beneath the moth-eaten blanket of ancient desiccated medical ethics. Follow the world whithersoever it goeth, for humanity is trending in that direction, and if you would make your skill and ability available to that humanity, you must not lag in the rear but march in the vanguard. "As I live," saith the Lord God, "I would not that sinners perish, but that they live." You are the agents to life, the impasse to death.

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